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ABSTRACT

This document comprises the two 1999 issues of a UNESCO newsletter addressing topics related to adolescent well-being in the Asia-Pacific region, particularly reproductive and sexual health. Each issue contains news from the region on various initiatives related to adolescent heath and education, as well as Web links and publications on the subject. Each issue also contains a feature article. The June issue features the Reproductive Health Initiative in Asia, a cooperative arrangement between the European Commission and the United Nations Population Fund. The December issue features inter-country training in consolidating and repackaging population information. Countries covered in the two issues include Cambodia, India, Laos, Sri Lanka, Vietnam, Nepal, Pakistan, Bangladesh, Malaysia, Mongolia, Indonesia, and Fiji. The brief articles provide various statistics, program descriptions, guidelines, concerns, and recommendations related to improving adolescent reproductive heath and general well-being in this region. (KB)

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Adolescence Education Newsletter, 1999

Carmelita L. Villanueva and Teresita M. Padilla, Editors

Volume 2, Numbers 1-2
June-December 1999

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ADOLESCENCE EDUCATION NEWSLETTER

EC/UNFPA Initiative for Reproductive Health in Asia

COUNTRY FOCUS: Adolescent reproductive health

- ☐ Cambodia
- ☐ India
- ☐ Laos
- ☐ Sri Lanka
- ☐ Viet Nam

COUNTRY FOCUS: Community-based reproductive health services

- ☐ Nepal
- ☐ Pakistan

COUNTRY FOCUS: Delivery of a comprehensive reproductive health service package in urban underserved areas

- ☐ Bangladesh

PS 029397

Contents

ARH, a major focus of EC/UNFPA Initiative for Reproductive Health in Asia 2

Regional News 4

National News 5

Updated reports from Cambodia 8

Three young people speak of their involvement 25

Web Links 26

Publications 28

ADOLESCENT REPRODUCTIVE HEALTH - a major focus of EC/UNFPA Initiative for Reproductive Health in Asia

The Reproductive Health Initiative (RHI) in Asia, the largest co-operation arrangement between the European Commission (EC) and the United Nations Population Fund (UNFPA), is a four-year programme in selected countries in the region.

The RHI modalities were announced to European Union (EU) member countries and European NGOs at a launch meeting held in Brussels in April 1997. The meeting recommended that field activities should start in Bangladesh, Cambodia, India, Lao PDR, Nepal, Pakistan and Vietnam. Country-level meetings to select the country focus were organised in June 1997.

The programme derives its uniqueness from its main strategy, that is, to involve international, regional and local non-profit organisations in accelerating the implementation of the ICPD Programme of Action in South and Southeast Asia.

A financing agreement signed on 30 January 1997 provides 25 million ECU, representing EC's largest commitment to population programmes to-date, and more than 5 million ECU in funds and facilities from UNFPA, European, regional and national NGOs and organisations.

Overall responsibility for the implementation of the RHI rests with UNFPA. A technical co-ordination unit in Brussels and a management unit in New York have been set up. UNFPA is also drawing on its network of field offices and regional technical support teams. NGOs and other non-profit organisations and foundations, local or European, serve as operating partners in the execution of activities at the country level.

National and international NGOs tapped as main partners

The RHI is expected to complement and promote the development of sustainable alternatives to current systems, thus contributing to declines in fertility rates and mother and child morbidity and mortality rates. The different RHI projects are envisaged to lead to the establishment of exchange mechanisms between organisations. This strategic approach is expected to have a multiplier effect on sustainable reproductive health initiatives. Twenty-one European NGOs and over 60 national NGOs and organisations are involved in programme development and implementation of 38 country projects.

The programme includes regional interventions in research and evaluation, gender equity and reproductive rights, training of national NGOs, and information networking. At the national level, adolescent reproductive health was selected as focus in five countries, community-based reproductive health services in two countries, and quality reproductive services on clinical contraception in underserved urban areas in one country.

As of May 1999, 26 projects have started field activities. In total, 40 projects for seven countries and three regional projects have been developed, and are expected to be operational by 1 June 1999.

The EC contribution to the RHI has been fully programmed and NGO counterpart contribution of 10 per cent has been exceeded. The RHI has a total value of US$33.8 million.

try Focus

Adolescent reproductive health (ARH) is the selected priority focus in Cambodia, Laos, India, Sri Lanka and Viet Nam. Two countries, namely Pakistan and Nepal, are focussing on promoting based RH services. Bar focussing on the establi comprehensive contrace services in underserved

To support national-level activities with regional interventions, the EC and UNFPA, collaborating with selected European NGOs and institutions, have organised the activities to be carried out into four clusters: research and evaluation, gender equity and reproductive rights, training of national NGOs, and information network and communication.

Brief summaries of the country focus of RHI-participating countries are presented in the following section.

Adolescent reproductive health

Cambodia

By making ARH its focus, Cambodia hopes to increase knowledge and awareness of reproductive health, improve reproductive and sexual health practices and behaviour, make quality ARH services available, empower young people to make informed decisions about their reproductive and sexual well-being, and promote gender equity and equality. Eleven to 20 year olds have poor knowledge of reproductive health. Pre-marital sexual relations among adolescents are much more common than thus far assumed.

India

ARH activities are being carried out through community-based organisations. As a first step, a study of the reproductive health situation among adolescents has been undertaken.

Laos

Due to limited in-country NGO capacity, Save the Children Fund/UK, as lead agency, assists in project formulation and implementation and co-ordinates other locally established European NGOs.

Sri Lanka

Although many of the goals of the ICPD have been met, the unavailability of ARH services, particularly the provision of RH counselling and information, remains a serious drawback. Community-based organisations and NGOs are being encouraged to help promote ARH services.

Viet Nam

The nationwide pursuit of ARH as country focus is complemented by efforts to strengthen co-ordination and inter-linkages among national NGOs.

Community-based reproductive health services

Nepal and Pakistan

The country focus covers attention to women's issues, reproductive rights, male involvement in ensuring reproductive health, and promoting adolescent reproductive health. In Pakistan, particular attention is given to underserved rural areas and underserved population groups.

Delivery of a comprehensive reproductive health service package in urban underserved areas

Bangladesh

Emphasis is placed on clinical contraception and family planning services for young couples. These services require the support of IEC activities, including counselling for adolescents, attention to gender issues and male involvement in ensuring reproductive health, and advocacy for reproductive rights. Other RH issues are being addressed, including the treatment and prevention of STDs/RTIs, maternal health, and improvement of the family planning referral system, especially in peri-urban areas.

A review of RHI projects conducted in the participating countries starts on page 5.

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Regional News

Towards a common goal - A regional dimension for the RHI

A set of support programme activities provides a regional dimension for the Reproductive Health Initiative (RHI). It promotes cohesion among RHI activities, complements and strengthens NGO activities, and ensures the implementation of strategies and methodologies for project execution, as required by the Initiative.

The regional dimension of the RHI presents a way by which country-specific interventions inter-relate, taking into account the strategies adopted, the methodology for programme formulation, the indicators applied, monitoring and review, promotion of gender equity and reproductive rights, strengthening of NGO capacities and ownership, and promoting inter-NGO collaboration and sustainability of NGO activities.

The interventions share a common goal: to increase the RHI impact. Greater synergy among the interventions enhances their impact and cost-effectiveness and enables active involvement by the society in all aspects of reproductive health in any country.

The three projects below provide a regional dimension to the RHI.

Monitoring and Evaluation of EC/UNFPA Initiative

Lead/contact agencies:
Center for Population Studies, London School of Hygiene and Tropical Medicine
Associated agencies:
The Netherlands Interdisciplinary Demographic Institute and all operational partners

Under the project, monitoring and evaluation are co-ordinated, focussing on RH interventions by non-profit organisations and the development of local capacities and participatory mechanisms.

Among the main activities are a literature review on RH indicators, preparation of guidelines for collecting and using training materials on RH indicators, creation of a database, training in core indicators and methodologies, developing MIS and other reporting mechanisms, and so on. In-country consultants and umbrella projects will be consulted to identify areas for technical assistance to NGOs.

Information and Communication Network of the RHI in Asia (ACIN)

Lead/contact agency:
Deutsche Stiftung Weltbevolkerung (German Foundation for World Population)
Associated agencies:
All operational partners

The goals are to accelerate RHI implementation in Asia, enhance its sustainability, and ensure the exchange of experiences among agencies implementing RH programmes through a multi-faceted network involving South-South and South-North collaboration.

The main activities include a feasibility study, creation of a database on RHI partners and resource institutions, establishment of a monitoring system within the network, publication and distribution of RHI fact sheets and newsletter, and so on.

Gender Equity and Reproductive Health Rights

Lead/contact agency:
Associazione Italiana Donne per lo Sviluppo
Associated agencies:
All operational partners

The project seeks to ensure that gender equity and RH rights are duly taken into account in policy development and implementation in the countries concerned. As objectives, the project will create a database on gender materials, reproductive health, trainers and resource persons; incorporate gender concerns in RH programmes and projects; and enhance the technical and human resource capacity of concerned NGOs.

The project's main activities include recruitment of international project staff, preparation of an assessment study, creation of a database and bibliography, adaptation of UNFPA's gender training manual, and others.

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National News

Review of RHI projects

BANGLADESH

Background

While the national family planning programme has reduced the population growth rate to 1.7%, problems remain. Some 46% of the country's total population of 124 million live below the poverty line. Only 45% have access to basic health services and only 8% of childbirths in 1996-97 were attended by trained health personnel. Reductions in the infant, under five and maternal mortality rates are below ICPD targets.

The contraceptive prevalence rate in 1997-98 was 49% for all methods and 42% for modern methods, with oral contraceptives being the most popular. The introduction of door-to-door delivery systems and the limited range of contraception offered have pushed the popularity of short-term methods over long-term ones.

A strategy document, prior to confirmation in September 1998 of the country's participation in the RHI, provided the basis for the formulation of activities over a three-year period.

Five projects have been developed requiring funding of US$3 million.

Country focus: Improved quality of RH care for vulnerable groups

Taking into account the RHI goals and activities of various organisations and donor agencies, focus has been placed on the delivery of a comprehensive RH service package in urban underserved areas, emphasising clinical contraception. Improved long-term clinical methods are needed to promote the effectiveness and coverage of the population programme. Supporting IEC activities will be required, covering adolescent counselling, male involvement in reproductive health, advocacy for reproductive rights, and gender issues.

The RHI interventions aim to increase clinical contraception, ensure adolescent health, promote safe motherhood, increase male participation in reproductive health sevices, attain sustainability of reproductive health care programmes and so on.

To achieve these, the following major strategies have been adopted: expand quality services and build the capacity of NGOs and not-for-profit private sector, and undertake social mobilisation and IEC programmes.

RAS/98/P62 Expanding access of low-income women and men to reproductive health services in underserved urban/peri-urban areas

Executing agency:
Marie Stopes Clinic Society, Marie Stopes International

Implementing agency:
Marie Stopes Clinic Society

Target group: Low-income men and women in underserved peri-urban and urban areas

Location: Four medium size towns: Moulavibazar, Laxmipur, Narsingdi and Keraniganj

Objectives and strategies:

To help increase the utilisation of family planning and reproductive health services among low-income men and women in the target areas, the following strategies are being pursued: establish four clinics in four underserved small towns (urban and peri-urban areas) to improve access to quality RH services, including clinical contraception and information on RH, STDs/RTIs and family planning; enhance the capacity to organise RH service delivery and promote RH advocacy through IEC materials and campaigns; and establish linkages with RHI partners, other NGOs, government health programmes and non-formal practitioners within the community.

Main activities:

- Establish four clinics, provide equipment and recruit/train head office and project staff
- Complete strategic business plan and legal procedures and set up referral linkages and MIS
- Introduce quality management systems and monitor/review continuous improvement
- Set up client survey system and carry out baseline/client and IEC research and agree on local IEC strategy and implementation
- Select agency for vasectomy promotion and develop vasectomy promotion plan
- Assess needs of non-formal practitioners and identify potential service providers
- Develop training package and provide training
- Identify local health/family planning officials and establish linkages within the catchment area
- Attend regular meetings, special days and other activities, co-ordinate with the UNFPA RHI umbrella project and other RHI partners, and participate in joint activities
- Incorporate financial planning, reach an agreement with clinics on the MIS format and financial performance measures, and conduct regular monitoring and training of finance staff at the headquarters and in the clinics

RAS/98/P63 Reproductive health through community involvement with special attention to adolescents and clinical contraception

Implementing agency: Save the Children Fund, Bangladesh

Target group: Male and female adolescents and underserved/ vulnerable couples in the project areas

Location: Four districts in Khulna, Moulavibazar, Cox's Bazar and Panchagarh

Objectives and strategies:

Ways to increase the range of RH information and care available to adolescents are being explored, with a view to improving their sexual and reproductive health knowledge and practices (including self-protection against STDs), and to increasing clinical contraception use in the project areas.

The strategies being pursued are as follows: strengthen the capacity of four local partners to carry out adolescent-sensitive programmes through training and other technical support; conduct participatory workshops with different adolescent groups to design strategy and programmes suited to their needs; promote advocacy for adolescents regarding their needs and support to guardians/parents, teachers, community leaders and private practitioners/service providers; develop a platform for adolescent and adolescent-friendly clinics, promoting peer group and self-help groups for adolescents to strengthen their knowledge and awareness; and promote community-based programmes on reproductive health and family planning, especially clinical contraception, for different groups.

Main activities:

- Select partner NGOs and recruit staff, based on a set of criteria
- Carry out baseline KAP survey in four project sites and hold participatory workshops for different adolescent groups
- Assess adolescent health care and need for information on sexual and reproductive health
- Design strategies to transfer knowledge and disseminate reproductive health information
- Conduct project staff training and training sessions and/or peer counselling for adolescents
- Assess training courses, workshops and seminars
- Provide ARH services
- Conduct post-training follow-up and organise meetings with adults
- Follow-up adult activities in support of adolescents and provide limited curative care and clinical contraception
- Organise meetings with service providers and organise appropriate health services
- Promote use of clinical contraceptives and train clinic staff in providing clinical contraceptives
- Develop facilities for clinical contraception and provide family planning methods to other clinics
- Follow-up clients and establish functional linkages with other organisations

RAS/98/P64 Strengthening access to improved reproductive health services through the Bangladesh Red Crescent Society

Implementing agency: Bangladesh Red Crescent Society (BDRCS)

Target group: Mostly low-income groups (especially slum dwellers) and some medium-income groups around BDRCS hospitals in Sylhet town and old parts of Dhaka city

Location: Sylhet town and old parts of Dhaka city

Objectives and strategies:

The main objective is to strengthen the facilities and technical and human resource capacity of BDRCS, in order to manage quality reproductive health services, especially clinical family planning and safe motherhood activities, and to enhance Red Cross volunteer activities by mobilising grassroots men and women and men to raise the demand for family planning and reproductive health sevices, with assistance from government health workers.

The strategies include the following: upgrade two BDRCS hospitals in Sylhet and Banglabazar by providing training and improving quality of services and RH facilities; provide post natal counselling for clinical contraceptive by trainee paramedics and nurses; and establish referral linkages with other RHI partners, such as local clinics run by the Marie Stopes Clinic Society and the Family Planning Association of Bangladesh.

Main activities:

- Repair and renovate hospital facilities
- Develop facilities for safe motherhood and RH services
- Recruit and train project staff and conduct baseline survey/KAP survey
- Form groups of men and women and adolescents, to be carried out by CHW
- Conduct RC group meetings/ training by CHW with IEC materials and information
- Strengthen hospital management by deploying cost recovery mechanism, project monitoring, ensuring referral service
- Collect routine information and prepare monthly/quarterly reports as required

RAS/98/P65 Expanding access to quality reproductive health services in underserved outlying districts in Bangladesh

Executing agency:
International Planned Parenthood Federation (IPPF)

Implementing Agency:
Family Planning Association of Bangladesh (FPAB)

Target Group: Mostly low-income and some medium-income groups from 10 small underserved district towns, including urban, peri-urban, and rural population from catchment areas

Location: Districts of Magura, Jhalokati, Bhola, Panchagar, Sayedpur, Laxmipur, Cox's Bazar, Sunamganj, Netrokona and Manikganj

Objectives and strategies:

To increase access to quality reproductive health care services in the project area, the following strategies are being pursued: expand reproductive health services (with special emphasis on clinical long-term methods) through special work units/upgraded clinics and mobile clinics; develop and use IEC materials for information and awareness raising; hold community-based meetings for information dissemination, RH awareness and motivation and clinical contraception through BCC and community health promoters; increase demand for RH services through campaigns, advocacy and other activities; organise adolescent school-based programmes and peer group meetings on awareness raising and reproductive health; strengthen field units/local NGOs and community-based organisations through training and support; promote inter-linkages with other RHI partners, relevant government agencies, and other NGOs; and establish a cost recovery process for sustainability.

Main activities:

- Conduct needs assessment survey/baseline survey
- Design and produce or collect relevant IEC materials and use them and share with partners
- Recruit and train community health promoters and other project staff
- Organise youth and adolescent peer groups and school-based education programmes
- Disseminate information and messages on reproductive health services through community meetings
- Conduct group counselling and outreach clinic sessions and provide quality clinical family planning services
- Establish linkages and referral service for reproductive health and permanent contraception
- Follow-up clients based on service delivery protocol
- Identify relevant organisations and their functional areas
- Develop operational modality, feeback mechanism and MIS and conduct regular monitoring
- Network with other organisations

RAS/98/P55 Umbrella project for Bangladesh: strengthening NGO capacity and linkages to improve reproductive health services and information

Implementing agency:
UNFPA, Bangladesh

Target group: Partner NGOs and local organisations

Location: Dhaka and selected project sites through RHI partners in Bangladesh

Objectives and strategies:

The main objective is to strengthen the technical and human resource capacity of participating NGOS, and the functional linkages between national NGOs and relevant government agencies to help harmonise and standardise the delivery of reproductive health information and services.

The umbrella project is collaborating with RHI-participating NGOs in a policy paper on ARH, to be presented to national authorities at the end of the project.

The umbrella project will maintain contact with the regional dimension project and collaborate in its activities.

Programmes implemented by partner NGOS are being reviewed and monitored as a capacity building exercise. Linkages among national NGOs and government agencies and a platform for experience sharing are being developed.

Main activities:

- Appoint project staff and assess needs and expectations of partner NGOs
- Design and organise training/ workshop series for partner NGOs, assist in preparing their work plans and reports, and hold co-ordination/ review meetings
- Develop a common monitoring framework; establish a working group for standardisation
- Monitor project implementation by partner NGOs and integrate a national advisory committee in the project review
- Strengthen inter-linkages among the partners and other stakeholders
- Establish working groups on RHI advocacy and liaise with relevant government agencies, NGOs and other organisations
- Prepare IEC materials inventory and provide partners with standard materials and information
- Participate in regional RHI activities and maintain linkages with other countries
- Serve as focal point for regional RHI activities in Bangladesh
- Document lessons learned and organise annual dissemination seminar

CAMBODIA

Background

The absence of a strong and stable government structure and system of public services has setback reproductive health activities in Cambodia.

The breakdown of moral values and poor law enforcement, two of the most devastating effects of war, are pushing adolescents to promiscuity as a way of life. The few youth organisations in existence concentrate on politics, at the expense of other issues that are vital to society. The country focus on youth and reproductive health responds to these critical circumstances.

The RHI programme in Cambodia consists of eight projects amounting to $4.6 million (EC-UNFPA contributions). All projects are on-going.

Country focus: Youth and reproductive health

A 1996 survey places the number of HIV cases in Cambodia at 70,000 to 120,000 in a total population of 10.8 million. Some 90% of the total population are between the ages of 15 and 35 years.

Prostitution and the trafficking of women and children are on the rise. Poverty, low status of women, poor quality education and lack of access to it (60% of all women have not completed primary schooling) present major obstacles to adolescent reproductive health initiatives.

Current reproductive health programmes do not focus on the needs of adolescents and do not recognise the comparative advantages of NGOs in dealing with these issues, particularly IEC and advocacy.

The RHI objective in Cambodia is to contribute to sustainably improved reproductive health conditions among young Cambodians, aged 15 to 25.

The strategies are as follows: conduct relevant training and develop effective IEC materials; ensure the availability of ARH services and provide greater access to them; and build the capacity of local collaborating NGOs, particularly their technical and organisational capacities.

RAS/98/P10 Media education to improve adolescent sexual and reproductive health in Cambodia

Executing agency:
Health Unlimited

Implementing agencies:
Cambodia Health Education Media Services (CHEMS), Cambodia Health Education and Development (CHED)

Target group: Young Cambodians aged 12-25

Location: Phnom Penh, Battambang and other areas reached by transmissions

Main activities:

- Produce interactive radio magazine programmes for the youth together with supporting magazine supplements
- Provide health and media staff with specialist training and work experience to improve their media skills, enabling them to produce IEC materials
- Involve the youth in media production using an interactive format and focus group discussions

Objectives and strategies:

Through the use of interactive radio and other media, the project is working towards increasing knowledge and awareness of reproductive and sexual health among Cambodian youth.

Other objectives include promoting the use of reproductive and sexual health care services for Cambodian youth; improving youth involvement in developing IEC materials on reproductive health; and increasing the capacity of NGOs, government agencies and the private sector to develop IEC for the youth.

An initial workshop with NGOs to explore the role of radio has been held as one of the project's strategies. The other strategies are using NGO expertise in radio show production and sharing IEC messages with the media.

Exploring the use of radio and sharing IEC messages are some of the project's strategies to reach its objectives.

RAS/88/P11 Promoting reproductive health practices among working adolescents and young adults (industrial workers)

Executing agency:
Care (Deutschland)

Implementing agencies:
Cambodia Health Education Development (CHED, Battambang) and RH Association in Cambodia (RHAC)

Target group: 10,000 young working people and adolescents aged 12-29

Location: Garment factories in Phnom Penh; workplaces and youth venues in Battambang

Objectives and strategies:

The project seeks to reach a minimum target group of 10,000 out-of-school single, working adolescents and young adults, and at least 50 trained RH providers and educators in selected project sites. The project also seeks to provide new specialist reproductive health services to a minimum target group of 200 single adolescents and young adults, per month and per newly-operational reproductive health facility in selected project sites; and to build the capacity of at least two partner NGOs in adolescent reproductive health services.

As its two-part strategy, the project is sharing IEC expertise and using CHED (Cambodia Health Education Development) as an informal IEC clearing house.

Main activities:

- Develop co-operative relationships with factory owners and employers' organisations and carry out research on the status of the target population
- Mobilise, train and support teams of RH providers and educators in the workplace and other relevant sites to reach the target groups
- Develop and disseminate relevant IEC materials
- Provide on-site or mobile clinical and referral services to other RH services

RAS/98/P12 ARH in Cambodia (Phnom Penh and Sihanoukville municipalities and Battambang and Kampong Cham provinces)

Executing agency:
International Planned Parenthood Federation (IPPF)

Implementing agency:
RH Association in Cambodia (RHAC)

Target group: Young Cambodians aged 12-25

Location: Phnom Penh, Sihanoukville, Battambang, Kampong Cham

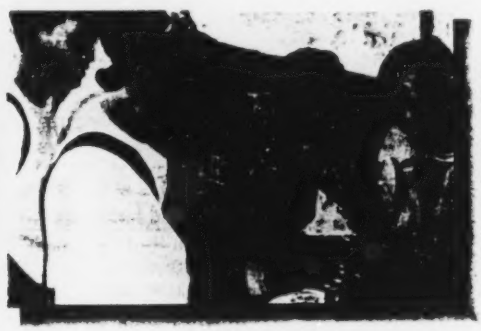
Objectives and strategies:

The project seeks to help strengthen national capacity to deliver RH services and high quality reproductive health IEC for adolescents in selected project sites; and to increase utilisation of reproductive health services by youth aged 12-25 years.

The strategies are as follows: provide back-up IEC services and specialist technical inputs to the production of radio shows; and share the family life education curriculum as a resource.

Main activities:

- Meet with stakeholders to encourage community participation and carry out needs assessment
- Organise ARH services in four locations, providing special clinic facilities
- Set up youth club activities and mobilise/train/support youth volunteers to provide outreach, peer education and referrals to clinical services
- Develop and disseminate IEC materials developed for specific target groups and media campaigns



Adolescents in selected project sites are given access to reproductive health services and high quality reproductive health IEC materials.

RAS/88/P13 Reproductive health for marginalized youth in Phnom Penh and Kratie province

Executing agency:
Save the Childen Fund, UK

Implementing agencies:
Women's Organisation for Modern Economy and Nursing (WOMEN), Squatters' Urban Poor Federation (SUPF), and Kratie Women's Welfare Association (KWWA)

Target group: 30,00 marginalized youth aged 12-25

Location: Squatter areas in Phnom Phen and Kratie province

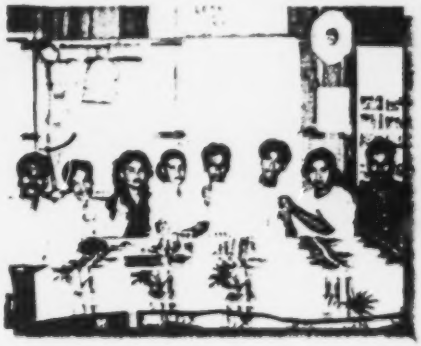
Objectives and strategies:

A major objective of the project is to improve knowledge of HIV/AIDS/STDs and thus prevent them from occurring. In addition, the project seeks to increase access to contraceptive techniques among young people in selected squatter communities in Phnom Penh and in Prek Krasop and Kratie districts in Kratie province; and to help change adolescent attitudes and behaviour and improve their life skills.

As strategies, the project is playing a lead role in assessing the training needs of participating NGOs; and organising shared training in reproductive and sexual health as well as quarterly meetings to enable the sharing of experiences.

Main activities:

- Set up counselling/information centres in Phnom Penh, Kratie town and Kratie rural area
- Provide RH counselling/information; develop, gather and adapt relevant IEC materials
- Organise outreach activities, such as focus group discussions, role-playing, cultural events, and distribute IEC materials to target communities
- Mobilise, train and support peer educators and organise activities to promote life skills and more responsible decision-making
- Collaborate with youth groups and relevant local agencies



By improving the public's knowledge of HIV/AIDS/STDs, there is a greater chance of preventing them from occurring.

RAS/98/P14 Reproductive health for vulnerable children and youth in Cambodia

Executing agency:
Mith Samlanh/Friends

Implementing agency:
Pharmaciens Sans Frontieres (PSF)

Target group: 30,000 vulnerable youth aged 8-25

Location: Streets and squatter areas in Phnom Penh and Kampong Cham province

Objectives and strategies:

The project seeks to provide reproductive health information, education and care among vulnerable urban youth and children in squatter areas, pagodas and streets; reintegrate vulnerable youth and correct abusive/risky behaviour; introduce RH services in vulnerable communities; and build the capacity of partner agencies and NGOs in all aspects of the project.

As its strategy, the project is working with vulnerable groups, including commercial sex workers and street children, to teach them useful skills.

Main activities:

- Open youth centres in squatter areas to provide life skills and health education and basic health care and referral system, in response to needs shown in KAP surveys
- Promote HIV/AIDS/STD awareness among street children and RH awareness among vulnerable young women
- Develop training and education for vulnerable urban youth, including job placement and provision of credit for small business
- Support/follow up young people and their families as a step towards social integration
- Provide RH education and life skills for young people and vulnerable communities, using a variety of approaches, including peer education

RAS/88/P15 Reducing the vulnerability of young Cambodians to HIV/STDs by mobilising and strengthening local NGO sector

Executing agency:
International HIV/AIDS Alliance

Implementing agencies:
Khmer HIV/AIDS NGO Alliance (KHANA) and nine partner NGOs

Target Group: Young Cambodians aged 12-25

Location: Phnom Penh and NGO target areas in the provinces of Battambang, Kg Chnang, Kampot, Takeo, Prey Veng, Kg Cham and Kh Thom.

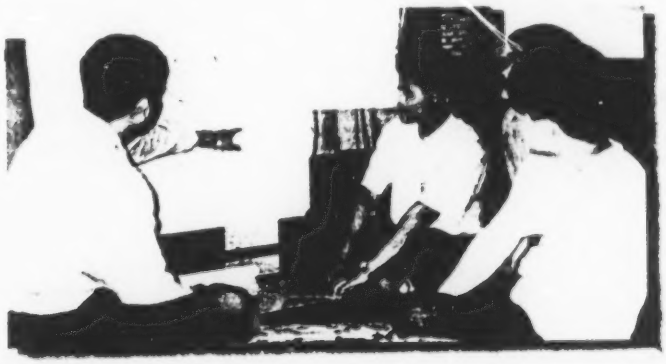
Objectives and strategies:

The project seeks to help reduce the vulnerability of young people aged 12-25 to HIV/AIDS/STDs by strengthening NGO capacity to develop sustainable, effective and appropriate responses to HIV/AIDS/STDs.

The strategies include strengthening local NGO capacity, sharing technical support concerning HIV/AIDS, and working together to develop IEC on HIV/AIDS.

Main activities:

- ◆Enable NGos to undertake broader response to HIV/STDs by mobilising, selecting, contracting, monitoring and supervising local NGO projects
- ◆Enhance local NGO capacity to work with the youth by organising specialist training workshops, providing technical support and training in external relations and sustainability, and promoting local NGO/youth volunteer exchange and exposure programmes
- ◆Strengthen the capacity of local NGOs through training, skills building, technical support and development of NGO support programmes
- ◆Improve the knowledge base of programming for youth by identifying, documenting and disseminating effective programming models and tools



To reduce the vulnerability of young Cambodians, the project is strengthening local NGO capacity, sharing technical support concerning HIV/AIDS, and working together to develop IEC on HIV/AIDS.

RAS/98/P16 Youth and adolescent reproductive health umbrella project

Executing agency:
Save the Children Fund, UK and UNFPA

Implementing agencies:
Save the Children Fund, Cambodia and all collaborating NGOS

Target group: Target groups of all projects

Location: All project areas

Objectives and strategies:

The project places high priority on two objectives: establishing a database for the RHI and facilitating shared training courses and exchange visits between RHI projects. Other objectives are to facilitate regular meetings between component projects and the national advisory group, serve as a resource on ARH and the RHI, and develop publicity materials and monitoring mechanisms for the RHI.

As its strategy, the project is maximizing collaboration and synergy among the RHI component projects by facilitating linkages and shared activities.

Main activities:

- ◆Assist in developing monitoring system, establish an ARH database, support NGOs, visit projects
- ◆Facilitate the development of an IEC strategy, hold training workshops and meetings, and share IEC strategy and messages
- ◆Exchange ARH information and participate in World Population Day, IWD, World Aids Day, and so on

RAS/98/P18 Promotion of reproductive health in Kampot province for youth aged 12-25

Increasing community awareness and participation in local initiatives is crucial to the project.

Executing agency:
Memisa Medicus Mundi

Implementing agency:
Cambodian Health Committee (CHC)

Target group: 83,000 out-of-school youth aged 12-25

Location: Three operational health districts in Kampot province

Objectives and strategies:

The objectives are multi-faceted. The project seeks to promote sexual health among youth aged 12-25, increase community awareness of and participation in local initiatives, and strengthen reproductive health care delivery; contribute to increased reproductive health knowledge among the target group, prevent and treat HIV/AIDS/STDs, and promote contraceptive methods; increase awareness of reproductive health and ways to improve it, promote use of reproductive health services, especially for the youth; and generate reproductive health initiatives among the youth.

Main activities:

- Organise village-based youth groups, select youth leaders and train them to carry out baseline KAP surveys and to serve as representatives/peer educators
- Mobilise community support for ARH activities by organising meetings and workshops with local authorities, village leaders and parents, and by involving youth representatives in village health community programmes
- Organise youth activities at the village level, including games, videos, sports and drama
- Produce appropriate IEC materials in collaboration with young people
- Collaborate with local health clinics and existing service providers

The importance of sexual health must be promoted among youth aged 12-25.

LAO PDR

Background

Although there is no official population policy, there is political commitment to maintain harmony between population increases and economic growth. The country's Five-Year Socio-Economic Development Plan (1996-2000) aims to reduce the population growth rate to 2.4% from 2.8% in 1995.

Adolescents accounted for 31% of the total population of 4.9 million in 1995. While they represent a high risk group, adolescents have limited access to information and guidance on sexual and reproductive health.

The crude birth and death rates and infant and maternal mortality rates exceed the average for South-east Asian countries. Access to health care is limited and only 20% of all childbirths are assisted by medical personnel.

While the desired number of children per family is 4.2, the total fertility rate is 6.03%, indicating a large unmet demand for family planning services. Female sterilization is not available due to certain restrictions to health care for women.

Trained non-medical personnel handle the distribution of condoms and spermicides as well as issuance of pills to women who have undergone screening at health facilities.

In support of the overall RHI objective and the reproductive health needs of the grassroot population, European NGOs play the twin roles of executing and implementing agency, ensuring that RHI strategies and concerns are addressed and that community involvement and capacity-building of local NGOs are encouraged.

In total $2.9 million have been programmed (EC-UNFPA-NGO contribution) under the RHI in Lao PDR.

Country focus: Adolescent reproductive health

Pre-marital sex is common among young people and as a topic, it is taboo particularly among single persons. Due mostly to the high illiteracy rate (50% for women and 25% for men), young people have minimal knowledge of the human reproductive system and physical anatomy.

The potential spread of AIDS from neighbouring countries and the growing prevalence of STDs among both men and women are further compounded by the lack of medical services that have the capability to undertake accurate diagnosis. Contraceptive use among young girls is rare and the condom is unpopular.

The objectives being pursued through the RHI are to increase the availability and utilization of quality ARH services; to improve reproductive health knowledge and awareness among young people; and to enhance the commitment and capacity of national organisations and institutions to respond to ARH concerns and thus improve the sustainability of relevant activities.

The following strategies have been adopted: disseminate ARH information to young people in school, sexually active young people, service providers, and adults; promote reproductive health services for young people by re-orienting the training of health workers and service providers; incorporate reproductive health concerns in the medical and nursing training curricula; re-orient existing services to address adolescents; encourage male responsibility in sexual and reproductive health; pilot innovative/alternative service approaches for adolescents; prevent abortion/unwanted pregnancies through IEC materials, awareness raising among policymakers, and counselling services; prevent gender violence through effective IEC materials and by working with law enforcement officials and observing the confidentiality of health services given to victims of rape and physical abuse; address the needs of special groups of young people; build the technical and organisational capacity of relevant institutions and agencies; and promote an integrated/multi-sectoral approach to reproductive health.

RAS/98/P42 ARH in Laos: hospital-based training for better care of young mothers and their babies

Executing agency:
Enfants et Developpement (EED)

Implementing agency:
EED in collaboration with the Ministry of Health

Target group: Approximately 7,500 people, including young pregnant women, young parents, young people suffering from post-abortion complications, unmarried persons, and service providers.

Location: Mahasot Hospital, Vientiane; Luang Prabang, Pakse and Savannakhet provincial hospitals

Objectives and strategies:

The objectives are to improve pre- and post-natal care, deliveries and neo-natal care by upgrading the skills of staff to raise awareness of STDs/HIV/AIDS and other health issues and to incorporate these issues in training; and to upgrade the reproductive health knowledge and technical skills of medical hospital personnel.

As its strategy, the project is providing training in pregnancy pathology and hygiene education pertaining to STDs/AIDS and family planning, childbirth and post-natal care.

Main activities:

- Set up model centres and upgrade equipment and structure
- Train health staff at the central level to serve as trainers and to conduct training at regional hospitals
- Provide relevant health information to adolescents and young mothers

RAS/98/P43 Youth heaith and activity centre

Executing agency:
Save the Children Fund (SCF/UK)

Implementing agencies:
SCF/Laos in collaboration with the Lao Women's Union and Lao Youth Union

Target group: Approximately 1,000 young people in-school and out-of-school, employed and unemployed, vulnerable and otherwise; and approximately 250 service providers, parents and other adults

Location: Vientiane

Objectives and strategies:

The goal is to establish a drop-in centre for young people to have access to reproductive health information, counselling and services, as well as to give them a venue for training and social activities.

As strategy, the project is assessing current reproductive health knowledge, attitude and behaviour among young people. The findings provide the basis for the development of mechanisms for sharing reproductive health information and services with the youth.

Main activities:

- Establish a youth centre and set up mechanisms to provide reproductive health information and services
- Involve young people and the community in managing the centre
- Conduct research on current knowledge, attitudes and examples of risky behaviour among the youth, at the centre and in the community

RAS /98/45 Preliminary study to determine adolescent awareness, attitude and practices on STDs and AIDS in the provinces of Bokeo, Chappasak and Sekong

Executing agency:
Medecins Sans Frontieres (MSF)

Implementing agencies:
Provincial Health Departments, Lao Women's Union

Target group: At-risk groups of young people in rural and urban communities, including bar workers, migrant workers, truck drivers - some of whom belong to ethnic minorities

Location: Boeko, Chappasak and Sekong provinces

Objectives and strategies:

Baseline data on STDs/HIV/AIDS awareness among high risk groups, based on a six-month research, will help determine the need for a project to improve knowledge and awareness of STD/HIV/AIDS transmission. This will help motivate target groups to adopt more favourable behaviour, while also improving STD/HIV diagnosis and treament. A three-tiered anthropological approach has been adopted as strategy, covering practices, network and attitudes/symbolism.

Main activities:

- Compile existing information and materials on STDs/AIDS as they affect vulnerable youth groups
- Create interview guide booklets and questionnaires
- Draw conclusions and make recommendations
- Train field researchers, conduct field studies, analyse data, and draft a proposal for a two-year project

RAS/98/P48 Feasibility study for reproductive health projects in Laos

Executing agency:
Health Unlimited (HU)

Implementing agencies:
CHAMPA, Provincial Health Departments,
Lao Women's Union (LWU),
Lao Youth Union (LYU),
Lao Red Cross

Target group: Youth covered by RHI and adolescents in Attapeu province

Location: Vientiane and Attapeu

Objectives and strategies:

The goal is to carry out a feasibility study for reproductive health media projects (for radio and TV) to reach adolescents, and the incorporation of ARH in existing PHC project in Attapeu, targetting vulnerable adolescents including minority groups, and establishing ARH projects in other provinces in the South. The strategies are as follows: work with partner organisations and build their capacity in producing IEC materials for radio/TV/video and use the results of the feasibility study for a future project in Attapeu and other provinces.

Main activities:

- Develop strategy for working through the media with CHAMPA by adapting RH messages to local circumstances, carrying out campaigns using appropriate communication methods, and encouraging lifebuilding skills
- Incorporate ARH into the primary health care project in Attapeu by providing ARH information to service providers, adults and adolescents

RAS/98/P49 Production of gender- and culturally-sensitive IEC materials on adolescent reproductive health

Executing agency:
Ecole Sans Frontieres (ESF)

Implementing agencies:
ESF/Laos in collaboration with the Dept. of Non-formal Education

Target group: 4,000 ethnic minority young people living in rural areas, adolescents in urban and rural areas, and vulnerable groups addressed by other NGO projects

Location: Luang Namtha province and nationwide.

Objectives and strategies:

The objectives are two-fold: to produce gender- and culturally-sensitive IEC materials relating to adolescent reproductive health for *Ecole Sans Frontieres* and other NGOs involved in the country's reproductive health initiatives, and to provide training in the use of these materials and in conducting awareness campaigns.

The strategies are as follows: determine the requirement for reproductive health IEC materials and develop them; focus on reproductive physiology, contraception, sexuality, and STD/HIV/AIDS prevention (emphasising messages about risky behaviour, safe sex, and the meaning of consensual sex); and support the capacity-building of national counterparts.

Main activities:

- Collect IEC materials on reproductive health at regional and national levels
- Identify needs of component NGO projects and partners
- Design/adapt IEC materials and train partners in their use
- Promote better understanding of current reproductive health knowledge, awareness and needs in Luang Namtha province
- Develop materials for incorporating reproductive health into the non-formal education programme and train relevant staff in using the materials.

RAS/98/P53
Adolescent reproductive health umbrella project

Executing agency:
Save the Children Fund (UK) and UNFPA

Implementing agencies:
SCF/Laos and all collaborating NGOs

Target group: Target groups of all projects

Location: All project areas

Objectives and strategies:

The objectives are to establish a database for the Reproductive Health Initiative and facilitate shared training courses and exchange visits among concerned projects; to facilitate regular meetings between component projects and the national advisory group; to act as a resource on ARH and the RHI and to develop publicity materials; and to assist in developing monitoring mechanisms for the RHI. The strategy is to maximize collaboration and synergy between the RHI's component projects by facilitating linkages and shared activities.

Main activities:

- Assist in developing a monitoring system
- Establish ARH database
- Support NGOs and visit projects
- Facilitate the development of an IEC strategy
- Hold training, workshops, meetings and share IEC strategy and messages
- Exchange ARH information
- Participate in World Population Day, IWD, World AIDS Day

NEPAL

Background

Adolescent girls account for some 22% of Nepal's total population of 21.9 million, as of 1995. The majority are not reached by reproductive health programmes.

Early marriage is common. As many as 24% of adolescent girls in the rural areas have given birth to at least one child. While some 18% of all women receive ante-natal care, women in many remote communities have virtually no contact with health workers during pregnancy. Only 6% of all childbirths are assisted by trained attendants.

As many as 80% of women of child-bearing age are anaemic. Due to poor maternal health, around 29% of newly born infants are under weight.

Poverty and ignorance have given rise to the grim situation faced by young girls. Often neglected and discriminated against, many adolescent girls are exploited as sex workers, often with tragic consequences.

Because of cultural and social inhibitions, adolescent males are also inadequately informed about sexuality and reproductive health issues.

Nepal's patriarchal society, institutions and systems are dominated by men, many of whom have entrenched attitudes and gender biases. This is seen in the low use of male contraceptive methods, significant gender gaps and differences in mortality rates between men and women.

There are seven RHI projects in the country, totalling $4 million (EC-UNFPA-NGO contribution), including an umbrella project.

Country focus: Promotion of community-based reproductive health services

The scope of the country focus covers gender issues, reproductive rights, male involvement in reproductive health, and ARH advocacy, information and communication.

Through this project, improvements in the reproductive health status of women, men and adolescents in underserved rural areas, including marginalized urban populations, are expected. To help achieve this objective, appropriate community-based RH services are being provided through NGOs, NGO linkages with community-based organisations (CBOs), women's groups, local leaders, government health programmes, and so on.

As strategies, the project is mobilising grassroots organisations and helping them develop into active and articulate entities; encouraging collaboration among RHI projects through existing CBOs, instead of forming new groups, complemented by the establishment of linkages with NGOs active in the community, members of the community, the government health sector, and other available health services; supporting interactions among various stakeholders, leading to maximum collaboration and improvements in the effectiveness of overall community-based reproductive health services.

RAS/98/P35 Improving reproductive health of women, men and adolescents in urban, slum communities of Kathmandu and Patan

Executing agency: Associazione Italiana Donne per lo Sviluppo

Implementing agency: Environment, Health and Development Advisory Group

Target group: Slum communities, particularly women and adolescents who live in open and public places, are economic migrants and/or refugees, or are of low caste

Location: 46 slum areas in and around the cities of Kathmandu and Patan (Kathmandu and Lalitpur)

Objectives and strategies:

The objective is to improve reproductive health and reduce and prevent RTIs among the target population. The project is collaborating with other component projects as well as with the government's existing health infrastructure and other health services. It is also working to ensure community participation by building up the capacity of community institutions.

Project personnel and partners discuss strategies for improving reproductive health of women, men and adolescents.

Main activities:

- Raise RH awareness and encourage behavioural changes leading to the prevention and control of RTIs
- Improve access to RH services through the establishment of community health resource centres and a referral network
- Train urban slum community leaders in RH awareness-raising
- Collect and share information on the health and socio-economic situation of project communities

Access to RH services can be improved through the establishment of community health resource centres.

RAS/98/37
Working with young people on sexual and reproductive health

Executing agencies: World Population Foundation/International Planned Parenthood Federation

Implementing agency: Family Planning Association of Nepal

Target group: Young people (12-25 years) in areas with low contraceptive prevalence rate and poor education

Location: Four districts in the mid-western region (Achlam, Dang, Kailali, Kanchanapuri) and Kavre, a district in the central region

Objectives and strategies:

The objective is to empower young people in selected districts to adopt safe sexual and reproductive health behaviour and practices.

To achieve this, the project is collaborating with local authorities and existing government health services and encouraging participation by teachers, peer educators, youth and parents in relevant acitvities.

Main activities:

- Involve the youth in formulating action plans to improve sexual and reproductive health (SRH)
- Ensure delivery of appropriate and accessible SRH services and education to young people, as conducted by teachers and peer educators
- Create a community support system to ensure the reproductive health of young people

PAKISTAN

Background

Pakistan, the world's seventh most populous country, had an estimated population of 140 million in 1996 and a growth rate of 2.8%. The total fertility rate, estimated at 5.5% in 1997, is high even in the context of the South Asian region. The high fertility rate is attributed to a combination of socio-economic problems: low status and poor education of women, early marriage, and limited availability of RH services. Nearly half of the population have no access to health services and only 19% of all births are assisted by health personnel. Public expenditures for education and health are 2.6% and 0.7% of GDP, respectively.

The country's family planning programme, introduced in the 1960s, is expected to be modified to make it more responsive. The programme serves the majority of users of non-clinical contraceptive methods through service delivery points under the Ministry of Population Welfare. Users of clinical contraceptive methods are served by hospitals under the Ministry of Health. RH services are also provided by 6,298 health outlets, 21,425 registered medical practitioners, and 500 NGOs and community-based organisations (CBOs).

NGOs pre-date government involvement in the population programme.

In total, $3.5 million (EC-UNFPA-NGO contribution) have been programmed for the RHI in Pakistan.

Country focus: Community-based reproductive health services

Special attention is given to women's issues and reproductive rights, male involvement in reproductive health, and ARH services and IEC. Local and European NGOs participating in the RHI include the IPPF, Population Concern, World Population Foundation and Marie Stopes International.

The following RH projects are being undertaken:

- *Partnering NGOs to promote RH services, executed by the World Population Foundation and implemented by the Family Planning Association of Pakistan through CBOs*
- *RH clinic, CBD and mobile outreach programme in Dera Ghazi Khan, executed by Marie Stopes International and implemented by Marie Stopes Society/Pakistan*
- *RH care programme through CBD in eight units, 80 field workers and two surgical centres in Sindh and Karachi, executed by Population Concern and implemented by the Pakistan Voluntary Health and Nutrition Association through CBOs, and*
- *Strengthening NGO capacity and linkages to improve RH services and information, executed by the World Population Foundation and implemented by a consortium of local NGOs.*

SRI LANKA

Background

The national population programme has not adequately addressed the reproductive health concerns of unmarried adolescents and the youth, posing critical problems in view of the increase in the average age at marriage to 25 years and prevailing youth unrest (due to the very high literacy rate, increasing unemployment, and other social factors), that make the youth vulnerable to risky sexual behaviour. There is serious concern about growing child prostitution and increasing cases of pre-marital sex. Given that abortion for non-medical reasons is prohibited in Sri Lanka, it is likely that the number of septic abortions has increased.

A 1995 sectoral review of reproductive health and family planning, conducted jointly by the Ministry of Health and UNFPA reported that adolescent women account for 7.7% of annual child-births.

The UN's medium variant projections place the adolescent population (aged 10-24) at 2.5 million males and 2.4 million females by the year 2015.

The EC contribution to the RHI project is $640,059, while that of NGOs is $71,338. A national seminar on ARH strategies was held in Feburary 1999.

Country focus: Adolescent reproductive health

In view of the long period needed to fuily incorporate RH services for married and unmarried adolescents in the national programme, the Government is encouraging NGOs to take necessary action by pilot testing a project that will contribute to the development of a comprehensive ARH programme.

Some UNFPA-supported activities are underway, including the provision of ARH training to public health personnel and the preparation of a handbook for this purpose.

The primary focus of activities is to strengthen community-based ARH information and services.

NGOs are pioneers in family planning activities, supplementing the Government's own programmes. Of the four NGOs involved in RH/FP activities, a major one is the Family Planning Association of Sri Lanka (FPASL), which introduced family planning before the development of a national programme.

The FPASL has overall responsibility for the implementation of the strategy, working closely with other NGOs. The format for the collaboration is umbrella-type, that is, a single project - for which the FPASL is the executing agency - includes several sub-components carried out by NGOs that share similar objectives and strategies. The activities are inter-linked and complementary.

The project is working towards increased availability of and accessibility to integrated quality reproductive health information, counselling and services for adolescents and youth, especially among vulnerable groups in selected project areas. The project also seeks to increase community awareness of reproductive health and activate community involvement in providing ARH information and services in selected districts.

RAS/98/P17 Reproductive health information, counselling and services for adolescents and youth

Executing agency: International Planned Parenthood Federation (IPPF)

Implementing agency: Family Planning Association of Sri Lanka (FPASL)

Target group: Adolescents in 13 districts, including those living in areas of conflict, young female workers in industrial investment zones, internally displaced persons, in- and out-of-school youth, children who are vulnerable to the dangers of prostitution, youth living/working in plantations

Location: Gampaha, Kalutara, Galle, Puttalam, Polonnaruwa, Jaffna, Trincomalee, Colombo, Kurunegala, Nuwara Eliya, Badulla, Ratnapura, Gamparai

Objectives and strategies:

The project seeks to strengthen community-based ARH information and services, and to increase community awareness of and involvement in providing RH information and services to adolescents and youth, particularly vulnerable groups.

The project's strategies are as follows: select appropriate members of the community, including school teachers, officers of youth clubs, and members of community-based organisations (CBOs), and train them in providing counselling to adolescents and youth; link counsellors with medical personnel to facilitate approaches to young people who require medical services; create an environment conducive to youth and adolescent counselling and services; mobilise CBOs through the NGO network; address male participation in reproductive health and gender concerns; address adolescent needs by training public health staff in ARH issues and by promoting RH education in schools; and support IEC/advocacy activities of NGOs.

Main activities:

- Provide community-based services for adolescents and youth and disseminate IEC materials, messages and products
- Enhance the visibility and acceptability of reproductive health information, counselling and services for adolescents and youth
- Train counsellors and qualified volunteers and, when appropriate, provide counselling and referrals for medical services, always ensuring confidentiality
- Increase youth awareness of responsible sexual behaviour and involve community leaders in addressing the reproductive health needs of adolescents and youth
- Hold parent/teacher meetings on reproductive health issues that concern adolescents and youth
- Increase awareness of these issues among community members and elected govenment leaders
- Enhance FPASL staff development and reproductive health planning and management capability
- Reduce gaps in reproductive health data and introduce cost-effective strategies
- Increase the participation of NGOs and community-based organisations in promoting reproductive health

VIET NAM

Background

Government policy on population and reproductive health services and IEC addresses married couples only, thus leaving the needs of unmarried adolescents largely unmet. As a result, adolescents have poor awareness and knowledge of reproductive health, pre- and extra-marital sex is on the rise, abortions among single, unmarried women are increasing, and STD/HIV cases are prevalent.

The RHI in Vietnam seeks to achieve greater involvement by the civil society in the country's population and reproductive health programme.

The total RHI programme in Vietnam consists of eight projects and funding of $4 million (EC-UNFPA-NGO contribution).

Country focus: Adolescent reproductive and sexual health

The selection of adolescent reproductive and sexual health as country focus is based on a UNFPA study of existing documentation, NGO inputs and recommendations, and the lead role played by NGOs in this delicate sector. Viet Nam's adolescent population, an estimated 21 million in 1994, accounts for 31% of the total population. Adolescents include youth between the ages of 10 and 24.

In Viet Nam, the RHI seeks to improve the sexual and reproductive health of young people by improving reproductive health services in response to their needs, and by developing and promoting information, communication and knowledge of adolescent reproductive health through NGOs.

As its first strategy, steps have been taken to create ARH awareness among young people (through discussion groups, relevant/participatory in-school and out-of-school IEC programmes on ARH, and IEC campaigns at the community level using mass media channels), as well as among adults (through ARH awareness-raising activities).

Complementing this strategy are efforts to identify an ARH goodwill ambassador/advocate in the government or entertainment sector, and to develop a communication strategy for the adult population.

Another strategy, that is to make reproductive health services available to adolescents, takes into account the following: research concerning the provision of such services, re-orientation of training given to health workers/family planning volunteers, incorporation of ARH into the medical curriculum, re-orientation of existing services in favour of adolescent needs, promotion of male responsibility for reproductive and sexual health, and piloting of innovative/alternative service approaches for adolescents.

Other strategies being pursued are the following: giving particular attention to special groups of young people, including prostitutes, victims of domestic/gender violence, and migrant workers; preventing abortions/unwanted pregnancies by undertaking appropriate research, developing relevant IEC materials, raising awareness of abortion and providing counselling services; building the organisational and technical capacity of NGOs and enhancing collaboration among them and between NGOs and the government; and involving adolescents in project formulation and implementation.

RAS/98/P19 Introduction of adolescent reproductive and sexual health services for youth in Vietnam

Executing agency:
International Planned Parenthood Federation (IPPF)

Implementing agency:
Vietnam Family Planning Association (VINAFPA)

Target group: 10,000 youth (young workers and university students)

Location: Haiphong, Hanoi, Hue, Danang, Tien Giang Province, Nghe An Province and Ho Chi Minh City

To increase awareness of reproductive and sexual health the needs of working adolescents are given particular attention

Objectives and strategies:

The objectives are to increase youth awareness of reproductive and sexual health services, in particular out-of-school youth in provinces where the Vietnam Family Planning Association has branches, through awareness creation, advocacy, service delivery, and capacity building activities.

As its strategy, the project is addressing more specifically the reproductive health needs of out-of-school youth and working adolescents, particulary those who are migrants, by making ARH services available in selected industrial areas and in ARH clinics run by VINAPFA.

Making AF services available to adolescents is critical to the success of the project

Main activities:

- Develop IEC materials and promote advocacy for mass media support to adolescent sexual and reproductive health (ASRH) and organise ASRH campaigns and exhibitions in selected provinces/industrial parks
- Provide model family planning and ASRH service delivery in selected provinces
- Provide mobile services and support capacity building
- Provide training of peer educators and hold two training workshops per year for youth from mass organisations and youth clubs
- Monitor and evaluate the project, undertake support activities and encourage youth participation

RAS/98/P20 Capacity-building in adolescent reproductive health for local NGOs

Executing agency:
Care International (Deutschland)

Implementing agencies:
Research Centre for Gender, Family and Environment in Development; Supporting Centre for HIV/AIDS/STDs; Market and Development Research Centre; Centre for Reproductive and Family Health; Centre for Non-formal Education in Vietnam

Target group: NGOs and local organisations

Location: Hanoi and Ho Chi Minh City

Objectives and strategies:

The objective is to improve the capacity of local organisations to manage and implement ARH programmes.

To achieve this, the capacities of eight local organisations are being strengthened, enabling them to integrate ARH concerns in their current programme activities and to extend those activities.

Main activities:

- Review administrative and financial systems of existing local organisations and design and implement appropriate systems
- Run workshops for local organisations on ARH issues, programme design, proposal writing, donor requirements and interests, and strategic planning
- Assist local organisations in designing ARH projects to be reviewed by a panel and implemented under the supervision of CARE Vietnam
- Elect one representative local organisation and develop/implement a co-ordination plan for local organisations
- Hold meetings among CARE, local organisations and other NGO donors to discuss and design a policy paper for policy makers
- Present projects implemented by local organisations, as well as a policy paper at the final project conference

RAS/98/21 Adolescent reproductive health in Hue

Executing agency:
Marie Stopes International (MSI)

Implementing agency:
Midwives' Association

Target group: Adolescents in Hue province, especially those aged 18-24 years and unmarried

Location: Hue province

Objectives and strategies:

To provide affordable, sustainable and user-oriented ARH services in Hue, the project is taking the lead in integrating model ARH services and counselling in an existing RH clinic, ensuring at the same time that key persons in the province's health system and society are aware of the need to appropriately address ARH.

Main activities:

- Recruit and train team members and renovate/ refurbish facilities
- Develop/produce IEC and counselling materials
- Procure drugs and contraceptives, equipment and vehicles
- Conduct training and IEC activities, provide technical support and carry out monitoring visits

Proper recruitment and training of team members are essential.

RAS/98/P22 Adolescent reproductive health in Hanoi

Executing agency:
Marie Stopes International (MSI)

Implementing agency:
Youth Union (YU)

Target group: Adolescents in Hanoi, especially those aged 18-24 years and unmarried.

Location: Hanoi

Objectives and strategies:

To provide affordable, sustainable and user-oriented ARH services in Hanoi, the project has adopted the following strategies: emphasising a different approach to service delivery, sustainability, flexibility and review of IEC that focusses on service delivery and clients; and setting up a model ARH service clinic in Hanoi, to be done by MSI in collaboration with the Youth Union as a means to reach urban youth and create ARH awareness.

Main activities:

Project development: technical support/monitoring visits, short term study tours, English language/computer training, collection of reference materials, procurement of equipment and vehicles

Project implementation: recruitment and training of Youth Union leaders,' development/distribution of IEC, mass media materials and counselling materials, establishment of links with other reproductive health projects throughout Vietnam

Project evaluation: assessment of replication model

RAS/98/P41 Improvement of RH services and information for adolescents in nine communes of Nghi Loc District, Nghe An Province

Executing agency:
Enfants & Developpement (EED)

Implementing agency:
Women's Union (Nghi Loc District)

Target group: Young women (before and after first pregnancy); out-of-school adolescents and secondary school students, male and female.

Location: Nghi Loc district, Nghe An province

Objectives and strategies:

The project seeks to upgrade health infrastructure and the technical skills of staff, respond to the reproductive health needs of young adults and adolescents (male and female), build the capacity of local partners in implementing primary/reproductive health-related projects and to carry out follow-up work, build the management capacity of the Women's Union and district-level health service, and improve understanding of local reproductive health approaches and strategies through ARH data, information and experience. The Women's Union is participating in the RHI through district-level activities and existing network of health workers dealing with ARH, at the district/commune/village levels.

Main activities:

- Reinforce reproductive health and primary health care capacities at all levels
- Develop IEC materials
- Make RHI services available
- Conduct research, prepare reports and carry out an evaluation

Special attention is given to the pre- and post-pregnancy needs of young women

RAS/98/P54 Improving adolescent sexual and reproductive health services at commune level

Executing agency:
World Population Foundation (WPF)

Implementing agency:
Centre for Reproductive and Family Health (RaFH)

Target group: Adults and young people

Location: Hanoi and Nihn Bihn provinces

Objectives and strategies:

The project's objective is to create a more favourable social support system (within the community and in the home) to enable the provision of appropriate and correct sexual and reproductive health information and services to young people in 54 communes in two provinces.

The strategy is to create community awareness, particularly among parents, of the need to address ARH.

Main activities:

- Sensitize concerned provincial and district level authorities and solicit their active suport
- Prepare an inventory of existing health promotion materials for the general public and young people

RAS/98/P56 Vietnam umbrella project

Executing agency:
World Population Foundation (WPF)

Implementing agency:
World Population Foundation (WPF)

Target group: NGOs

Location: Participating NGOs in Vietnam

Objectives and strategies:

The major objectives are to strengthen NGO linkages in Vietnam and promote RHI collaboration, as well as to ensure complementarity among the projects and consistency in the country's RHI objectives. Another objective is to promote the role of NGOs in Vietnam in general and their capacity to deliver quality reproductive health services and information in particular.

To achieve the objectives, programmes under the RHI are being strengthened through the development of a database and monitoring system, provision of additional training, and by facilitating the sharing of lessons learned and other forms of South-South co-operation. Another strategy is to ensure publicity of RHI activities by preparing newsletters, brochures and other materials.

Main activities:

- Conduct support activities (information dissemination, training, study tours, meetings, etc.) to benefit existing component projects and their staff, and maximize collaboration, synergy and complementarity between the component projects, thus optimizing the RHI impact
- Set up a mechanism for monitoring and reporting the overall impact of the project and RHI-Vietnam

24

Updated reports from Cambodia

Reported by Ms. Sara Knibbs,
EC/UNFPA RHI Umbrella Project Coordinator, Cambodia

■ Radio show for the youth

Sok Sothea, 21, is one of the presenters of a new show, *Especially for You, Young People*, which is aired twice weekly on 95FM, one of Cambodia's most popular radio stations.

The radio show's first broadcast on 24 March was the culmination of six months' hard work by staff from the Cambodian Health Education Media Services (CHEMS) and Health Unlimited, working under the Youth Reproductive Health Programme within the EC/UNFPA RHI project for Cambodia.

Ms. Sep Viriya and Mr. Sok Sothea, co-presenters of "Especially for You, Young People" radio show (Health Unlimited CHEMS Project)

The radio show provides information on reproductive and sexual health, using a magazine programme format aimed at 12-25 year olds. Designed to be as interactive as possible, the show welcomes listeners to call in and offer their comments or to ask questions on the air. They may also convey their messages by postal mail.

The style and content - even down to the punchy signature tune - were pre-tested with focus groups of young people around the country. Their feedback and comments are encouraged as the show develops. *Especially for You, Young People* has a varied format, mixing drama, interviews, music and discussions.

Sothea, who is the same age as the target audience, is an approachable "brother" to the listeners, while his more experienced colleague, Ms. Sep Viriya, is an "auntie". Their style is relaxed and friendly and the initial response from listeners has been positive, as evidenced by the number of calls and letters received.

In addition to radio as a medium, *Especially for You, Young People* hit the newsstands last month with its first feature in the best-selling Cambodian fortnightly magazine, *Procheapray* (Popular). *Procheapray*, which features music and film stars, is a particularly popular magazine among young readers. The feature on Viriya and Sothea gave them another opportunity to respond to questions sent in by the public.

■ Providing medical services and counselling to adolescents through the Naga Youth Centre

Around 20,000 children live in the streets of Phnom Penh, earning a living by begging, scavenging, or engaging in casual work, including prostitution. With no adults to offer protection, they make up an extremely vulnerable group.

Street children are among the vulnerable groups targeted by Pharmaciens sans Frontieres (PSF), working in collaboration with two Cambodian NGOs, namely Friends and Operation Enfants Battambang, under the EC/UNFPA Youth Reproductive Health Programme.

Games are used as an effective learning tool, Naga Youth Center (PSF/Friends Project)

The project's latest initiative is the Naga Youth Centre which opened in February 1999. The centre is housed in a large wooden building that is situated near the entrance to a large riverside squatter community and opposite a popular park. It provides medical services and counselling to adolescents.

In the mornings, the centre caters to young women, with PSF offering medical services including STD treatment. Many of the clients are orange fruit vendors who work at night and are known to engage in commercial sex. Special sessions are being planned to encourage more street girls to participate in the centre's activities. In the afternoons and evenings, Friends operates the centre to serve male street children.

Some of the young visitors seek counselling. Their concerns include problems of substance abuse, unemployment, parental rifts, and relationships with members of the opposite sex.

Reproductive health issues, including physical and emotional changes at puberty, sexuality, birth spacing and HIV/AIDS, are discussed at training sessions. These are conducted using games, songs and other group activities.

Reproductive health is discussed in a wider context during training sessions on hygiene, the rights of children, the importance of education and training, and the critical problem of substance abuse.

The practical needs of street children are not forgotten. Showers are available for their use, so are condom-dispensing machines.

Many of the books in the library collection have been translated into Khmer. The library walls are decorated with drawings done by the centre's young visitors. Table football and video and karaoke equipment are available for the visitors' pleasure and entertainment.

In many ways, the Naga Centre is a safe and inviting place for vulnerable groups of young people.

Youth representatives take part in a body-mapping exercise as part of their training workshop. (Memisa/ CHC Project)

Mobilising rural youth

The province of Kampot in the southeastern part of Cambodia lies close to the border with Viet Nam. While the capital is only a few hours from Phnom Penh, the province's rural areas are remotely located and have limited access to services and communications facilities.

Under the EC/UNFPA RHI for Cambodia's Youth Reproductive Health Programme, the Dutch NGO Memisa is working with the Cambodian Health Committee (CHC) to provide sexual health education to out-of-school youth in rural Kampot. One of the project's strategies is to involve young people, who have been elected by their peers, in organising youth groups at the village level.

Young men organise their group for reproductive health education activities, Kampot province. (Memisa/CHC project)

Three young people speak of their involvement.

"I am Ung Choun and I work for CHC.

"After qualifying as a midwife in 1989, I worked in a hospital until 1998.

"I prefer working for this project to doing hospital duties. We are in the villages most of the time, working directly with the people. This makes me very happy. We visit rural areas that are remotely located from Kampot town, serving people who really need us.

"Young people are at an age where they are particularly vulnerable because they like to experiment. Our role is to give them information. I feel that they are keen to learn and are happy to have the project serve them.

"We have just finished a workshop for youth representatives from seven new villages. They were all quite shy at the beginning but once they became comfortable, they learned to speak up and ask questions. We did a few things during the workshop to make them feel comfortable - we used games to help them to get to know one another and build relationships.

"While the girls were usually more shy than the boys, they became less so as the workshop progressed. They all enjoyed taking part in our activities.

"A KAP survey told us a great deal about what they know. For example, while they have heard quite a lot about HIV/AIDS, many of them are still not clear as to how it is transmitted. It is the same with birth spacing - they recognize the term "birth spacing", but they don't know about birth spacing methods. We also learned that condoms are difficult to obtain as these are not available in the villages. We want to solve this problem and are looking for the best way to distribute condoms to young people."

"I am Chan Kosal. I am 19.

"For the past three years, I have been working with a construction team that builds wooden houses. I left school after the fifth grade.

"Three months ago, I began serving as male youth representative for my village of Tropeang K'da. We have two groups - a boys' group with 14 members and a girls' group with some eight members.

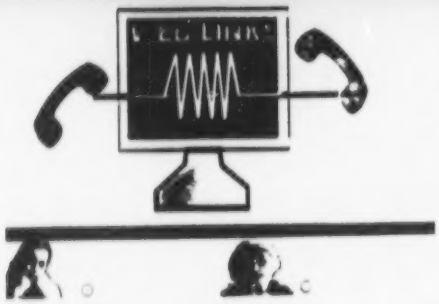
"I think that the most important reproductive health problems facing young people are AIDS and STDs. I participated in a training workshop with youth representatives from other villages. I found it more fun to learn together this way than to learn at school."

"My name is Oeun Sophy and I am 20 years old.

"I left school four years ago after finishing the ninth grade. I have five brothers and sisters. Three of us still live at home with our parents. Five months ago, I was elected as one of the youth representatives for the village of Damnak Krawyeung. Fourteen girls and ten boys from my village participate in youth groups.

"My role is to gather my group members and help in educating them about reproductive health. I took part in a survey to determine the knowledge level of young people concerning reproductive health. The results showed that they had little knowledge of this topic. Some of the survey questions were difficult to answer. For example, many girls were reluctant to talk about having sweethearts.

"I like being a youth representative as this gives me an opportunity to learn more about health and to help other people. I think that by having a better understanding of reproductive health, they will learn how to protect themselves."



Planned Parenthood Federation of America
http://www.teenwire.com

810 Seventh Avenue, New York, NY, 10019, U.S.
Phone/Fax: (212) 541-7800
E-mail:
communication@ppfa.org

This website addresses adolescent issues and concerns and offers guidance on how to cope with life's most difficult challenges. The website's "Dear Deb" section provides answers to real life problems. Another section deals with global perspectives on sex, dating, love, and life in general. Tips, such as ways to get through teenage blues, and facts on the male anatomy, pregnancy tests and contraceptive pills are found in different sections of the website. The website also carries articles, quizzes, and charts; news and stories on adolescent issues; and profiles of teenagers who are standing up for their rights and taking action concerning adolescent reproductive and sexual health. A special section enabling teenagers to discuss and share their views further makes the website interactive. The website's design, language and presentation are very appealing to teenagers.

Straight Talk Foundation
http://www.swiftuganda.com/~strtalk

Through this website, the Straight Talk Foundation seeks to promote a better understanding of adolescence, sexuality and reproductive health and to encourage the adoption of safe sex practices. It is also aimed at helping adolescents to acquire necessary life skills and to reach a clear understanding of the rights of children and human rights in general, thus easing the passage from childhood to adolescence. Two sections are particularly interesting. The first features a monthly publication called *Young Talk* and targets upper primary school students and young adolescents up to the age of 12. The publication's main messages address puberty, the rights and responsibilities of children, and general physical health and hygiene. Because of the tender age of the audience, the publication does not carry sex-related messages. The publication is also intended as a teaching tool for primary school teachers.

The second section, "Straight Talk: Keeping Adolescents Safe," also features a monthly publication for secondary school students aged 13 to 19. The major contents deal with puberty, relationships, sex, life skills, education, HIV/STDs, condoms and contraception. A counselling page is provided enabling counsellors and doctors to advise the readers. Straight Talk Clubs have been formed in many secondary schools.

Global Reproductive Health Forum Harvard School of Public Health
http:/www.hsph.harvard.edu/Organizations/healthnet

This website is a vast source of information aimed at encouraging critical and democratic discussions about reproductive health and gender. It provides interactive electronic fora to encourage the participation of underserved groups. Set up to serve as a clearing house, this website offers different sections. The teenzone section links users to hundreds of websites in the areas of teen abortion, contraception, HIV/AIDS, rights, STDs and teen life. Comprehensive and substantive information is provided, ranging from an overview of adolescent reproductive health, teenage pregnancy and sexuality, to resources that are intended to encourage teenagers, particularly those with special counselling needs, to talk confidentially with trained counsellors.

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pacific institute for women's health

Pacific Institute for Women's Health
http://www.piwh.org

2999 Overland Avenue,
Suite 111 Los Angeles,
CA 90064
Tel: (310) 842-6828
Fax: (310) 280-0600
E-mail: piwh@piwh.org

The Pacific Institute for Women's Health is dedicated to improving the health and well-being of women all over the world. Its website focusses on adolescent health as well as on women's rights and empowerment, reproductive and sexual health, health promotion and access to health services. The section on adolescent health provides local and international information and lessons learned by ARH projects. The local section describes projects dealing with advocacy initiatives to improve access to adolescent reproductive health services and to school-based interventions to promote adolescent health and exercise.

The international section focusses on projects that involve communities and youth and youth-serving organisations in the following areas:

- adolescent health issues, problem identification and the development of innovative, research-based, community-generated responses and solutions;
- investigations of linkages between adolescent sexuality and health and the testing of interventions to improve access to information and services; and
- in-depth pre-intervention, participatory research concerning adolescent reproductive health needs in selected African countries.

A third section brings together the experiences of Mexican and US researchers and service providers, enabling them to exchange ideas and share promising practices and models in adolescent reproductive health and to explore partnerships between organisations as well as cross policy, research and practice.

The Sex Education Coalition

Sex Education Coalition
http://www.SexEdCoalition.org

P.O. Box 341751
Bethesda, MD 20827-1751
Fax: 301-320-5446
E-mail: webmaster@SexEdCoalition.org

This website is meant for educators, health care professionals, trainers and legislators engaged in providing information and supporting informed discussions on sexuality and education. It offers educational materials to sexuality and family life educators, provides a forum for discussions among clinicians, legislators, parents and youth, disseminates up-to-date information from CVDC and the NIH, and presents a variety of materials and resources to the general community concerning sexuality education. Other features are a discussion forum and a section on publications and pamphlets, posters, videos and books. Students and researchers contribute reports and surveys through the discussion forum.

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taking action

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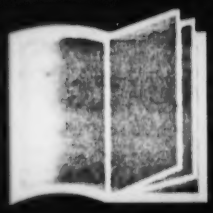
DRAWING ON HIGH SCHOOL

By Chris Henderson

For a lot of teenagers, just getting through high school is rough. 19-year-old Ariel Schrag not only lived through those years, but chronicled them detail-by-detail in comic books. Starting with Awkward, which covers her 9th grade year, Schrag has made a name for herself with her very personal stories that follow the highs and lows of her high-school life. Those experiences include her dealings with her parents and friends, her first stabs at dating, and her eventual coming out as a lesbian.



New and Recent PUBLICATIONS

- Centre for Health Education, Training and Nutrition Awareness. **Health, education and development of adolescents: CHETNA's perspective**. New Delhi, India: CHETNA, 1998. 47 p.

- Family Health International, Programme Assistance Center. **Growing up in family: a training manual on family life education for youth**. Research Triangle Park, NC: FHI, Asia Center, 1998. 103 p.

- Kaiser Family Foundation (Menlo Park, California). **Measuring up: assessing state policies to promote adolescent sexual and reproductive health**; vol. 1, no. 1. Washington, D.C.: Advocates for Youth, 1998. 144 p.

- Population Media Center. **Entertainment-Education and Development Inc.: A resource book on adolescent health, sexuality and development: a youth to youth model**. Manila: Foundation for Adolescent Development Inc., 1999. 90 p.

- Khan, A.U., M.D., Thomas Gromen, Plan People International. **Adolescent reproductive health: situation in East and South East Asia and the need for advocacy for policy**. Bangkok: UNFPA Country Support Team for East and South East Asia, 1999. [Paper presented at the Regional Workshop on Adolescent Reproductive Health, Bangkok, 15-17 March 1999.]

- UNESCO Principal Regional Office for Asia and the Pacific, Regional Clearing House on Population Education and Communication. **Adolescent reproductive and sexual health catalogue: 1999 no. 2**. April. Bangkok: UNESCO PROAP, 1999. 21 p.

- UNESCO Principal Regional Office for Asia and the Pacific, Regional Clearing House on Population Education and Communication. **Handbook for educating on adolescent reproductive and sexual health. Book One: Understanding the adolescents and their reproductive and sexual health: guide to better educational strategies**. Bangkok: UNESCO PROAP, 1999. 71 p.

- UNESCO Principal Regional Office for Asia and the Pacific, Regional Clearing House on Population Education and Communication. **Handbook for educating on adolescent reproductive and sexual health. Book Two: Strategies and materials on adolescent reproductive and sexual health education**. Bangkok: UNESCO PROAP, 1999. 107 p.

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We welcome your comments, suggestions and contributions for the Adolescence Education Newsletter. Please address your letters to: Editor, Adolescence Education Newsletter, Regional Clearing House on Population Education and Communication, UNESCO Principal Regional Office for Asia and the Pacific, P.O. Box 1425, Bangkok 10110, Thailand. Tel: [illegible] Fax: [illegible] E-mail: [illegible]

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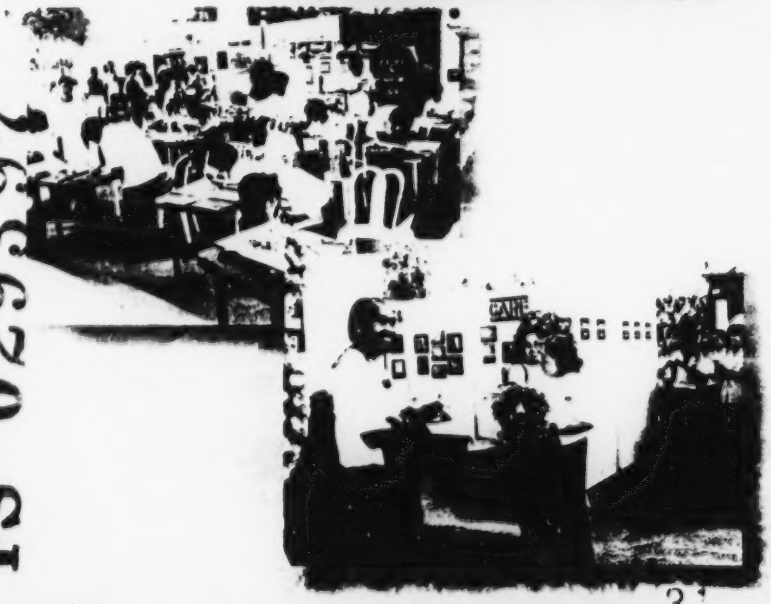
ADOLESCENCE EDUCATION NEWSLETTER

SHINING THROUGH

For the youth of Cagayan de Oro, Philippines, SHINE has brought bright days ahead. A unique project initiated by CARE-Philippines, SHINE stands for Sexual Health Initiatives through Networking and Education. Story on page 12.



IN THIS ISSUE:

p. 2
Learning from others:
Case studies enable countries to share experiences in advocacy and IEC strategies

p. 3
More power to information:
Inter-country training on information technologies

pp. 5-16
Roving report
A country-by-country report on activities to promote adolescent reproductive and sexual health, featuring Fiji, India, Indonesia, Lao PDR, Malaysia, Mongolia, Philippines, Sri Lanka, and Vietnam

p. 17
Profile
YA*TV – the Young Asia Television, the eyes and ears of young Asians

p. 19
Best Practices
The Foundation for Adolescent Development: A Sure Thing – Not Just a Fad

p. 22
Weblinks

p. 24
New and Recent Publications

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ADVOCACY AND IEC STRATEGIES
Getting the most from the experience of others in promoting adolescent reproductive and sexual health

Valuable lessons can be learned from the experiences of countries in planning and implementing adolescent reproductive and sexual health. With this in mind, the UNESCO Regional Clearing House on Population Education and Communication has commissioned a series of case studies on the subject, with emphasis placed on advocacy and IEC (information, education and communication).

The case studies will document the experiences of Bangladesh, China, India, Indonesia, Iran, Malaysia, Philippines, Sri Lanka, and Thailand. They will clearly spell out distinct differences between advocacy and IEC.

Advocacy activities include programmes to gain the support of lawmakers and policymakers, the mass media and other influential groups. IEC activities, on the other hand, reach out to the youth, counsellors, teachers and trainers, extension workers and motivators, and health personnel. A common IEC goal is to change the knowledge, attitude and behaviour of the target groups and to convince them to promote favourable reproductive and sexual health practices.

IEC activities reach out to the youth and may include an interesting variety of classroom projects.

The case studies commissioned by UNESCO PROAP will document the experiences of different countries in promoting adolescent reproductive and sexual health.

Advocacy and IEC also differ in strategies. Political lobbying, high level meetings, seminars for journalists, mass media campaigns, and advocacy skills training are typical advocacy strategies.

IEC strategies, on the other hand, include seminars/workshops, peer and individual counselling, in-school and out-of-school education, research, NGO involvement in community activities, ensuring the availability of and access to reproductive health services, and innovative activities such as hotlines, youth camps, dramas, TV shows, or a combination thereof.

Profiling adolescents, the case studies will look into demographic and fertility trends, sexual behaviour patterns, the incidence of STDs, contraception, teenage pregnancies, and so on.

The case studies will examine national policies, programme responses and strategies, factors that have contributed to best practices, and innovative approaches to advocacy and IEC. Their respective impact on the target groups will be evaluated. Organisations which have successfully carried out programmes/activities on adolescent reproductive and sexual health will be identified.

Synthesis

A three-volume synthesis of the case studies will be published and will serve as a useful reference for other countries in the formulation or implementation of their own advocacy and IEC activities.

Volume 1

The Adolescents: Profile and Problems, covering (i) demographic characteristics; (ii) knowledge, attitude and behaviour concerning sexuality and reproductive health, (iii) summary of trends highlighting magnitude of incidence and pinpointing current and emerging problems and challenges.

Volume 2

Programme Responses to Adolescent Reproductive and Sexual Health Problems, covering ARH policies and IEC and advocacy programmes. The following are described for each programme type: objectives, target audiences, types of organisations, strategies/activities, coordination, outputs/products, and summary of major trends and developments in ARH programmes.

Volume 3

Advocacy and IEC Strategies, Lessons Learned and Guidelines. Advocacy and IEC strategies will be analysed separately, describing their objectives, target audiences, and outcomes. The lessons learned will include factors that contributed to success or failure. The guidelines will be culled from the various country papers and grouped under advocacy or IEC.

Unesco PROAP sponsors inter-country training

Consolidating and repackaging population information

Mr. Victor Ordonez, UNESCO/ PROAP Director, presided over the opening of a two-week inter-country training course in consolidating and repackaging population information. Ms. Carmelita L. Villanueva, Chief of PROAP Information Programme and Services, led in conducting the course.

Before population statistics, research findings and data can be consolidated and repackaged, they must first be critically selected, processed and analysed. This will ensure the usefulness of the resulting repackaged products in the design, review and implementation of national population policies, plans, programmes and activities.

A two-week inter-country training course, organised by UNESCO/PROAP in collaboration with the UNFPA Country Support Team for East and South-East Asia, enabled participants from 18 countries in Asia and the Pacific to upgrade their (i) knowledge of the theories, principles and strategies of information repackaging and its application; (ii) skills in using PowerPoint, Harvard Graphics and other software and in preparing newsletters, fact sheets, policy briefs, and advocacy materials; and (iii) ability to evaluate the relevance, usefulness, and reliability of sources and resources, to interpret data and research findings and to simplify technical data and language.

The training course, held on 13-14 September 1999, was opened by Mr. Victor Ordonez, UNESCO/ PROAP Director.

The participants' outputs included PowerPoint presentations on communication and advocacy strategies for adolescent reproductive and sexual health and other relevant topics; booklets and fact sheets on relevant topics; policy papers and kits on the status of population education and population programmes; and other materials.

The participants included programme officers, information specialists, documentalists and educators who work with governments, NGOs and universities in implementing UNFPA-funded population and reproductive health programmes. Assisting them were Ms. Carmelita L. Villanueva, Chief of PROAP Information Programme and Services, and the Regional Clearing House staff. Six advisers from the UNFPA Country Support Team served as resource persons.

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Harnessing the power of information and communication technologies

The expansion of brain power through the Internet revolution has brought at everybody's fingertips a wealth of options and solutions for solving the world's problems.

Mr. Richard Engelhardt, Director a.i. of UNESCO, made the statement in his opening remarks at a two-week inter-country training course on Information and Communication Technologies (ICTs) for Population and Reproductive Health. Mr. Engelhardt further stressed the power of ICTs to bridge the gap between urban and rural populations and the rich and the poor.

The training participants try their hands at website development.

The course, held by UNESCO PROAP in collaboration with UNFPA on 21 June to 2 July 1999, was attended by 16 participants from Bangladesh, Cambodia, China, India, Indonesia, Iran, Malaysia, Myanmar, Nepal, Philippines, Sri Lanka and Thailand.

Ms. Carmelita Villanueva, Chief of PROAP Information Programme and Services, called the participants' attention to the unparalleled opportunities created by ICTs to promote reproductive health and to resolve population issues. She encouraged them to fully exploit the ICT capabilities that are available in their home countries and thus benefit from their use.

Mr. Richard Engelhardt (seated, second from right), Director a.i. of UNESCO, opened the inter-country course in information and communication technologies for population and reproductive health.

Ms. Villanueva noted that in many countries, the information infrastructure of reproductive health and population programmes have been revolutionised through the establishment of information networks, access to e-mail and the Internet, and use of electronic CD ROM.

The course exposed the participants to new tools and techniques for disseminating information through digitized and electronic methods, the CD ROM and websites in the World Wide Web. The participants are expected to mount their ready-made sites on their return to their countries.

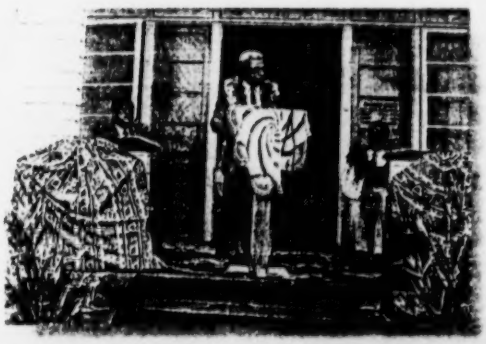
Challenges for the Future	
1.	Rationalising, systematising and integrating the use of ICT in population and RH services.
2.	Adopting innovative ways of reaching rural communities using information technologies.
3.	Using ICT for distance learning and continuing education.
4.	Maximising the use of e-mail.
5.	Promoting advocacy training in the use of the Internet.
6.	Producing more population and reproductive health CD-Roms.
7.	Equipping programmes for electronic publishing and accessing electronic publications.
8.	More effective operation of electronic discussion groups.
9.	Optimising desktop publishing and multimedia facilities.

FIJI

Launching of adolescent health programme and services

The Minister of Health of Fiji inaugurated the country's first Adolescent Health Centre in the presence of UNFPA and WHO representatives in the South Pacific, namely Mr. Jose Ferraris and Dr. Shichuo Li.

Operating from the Reproductive Health Clinic, the Centre provides adolescent health programme and services, including counselling and family planning and STI services. Later, the Centre plans to incorporate programmes to promote mental health and to address the problem of alcohol and substance use. The Centre is staffed by well-trained peer educators and supported by a medical doctor and two nurses. Support is also provided by UNFPA through the provision of clinic equipment and staff training.



Scenes from the opening of Fiji's first Adolescent Health Centre, presided over by the Minister of Health.

INDIA

Thoughtshop Foundation makes a difference

Since its registration in 1987 as an NGO, the Thoughtshop Foundation has been spearheading a variety of public service activities, particularly sexual health programmes. Simply put, the Thoughtshop Foundation sells ideas and develops projects for organisations.

For the two co-founders, former advertising executives, Mira Kakkar and Mritunjoy Chatterjee, "social communication has always been a passion". The Foundation, they recall, was born out of a successful anti-drug campaign that they had organised.

Using the communication skills of its team members to advantage, the Thoughtshop Foundation does most of the groundwork in formulating projects and works out schemes to reach target groups. As required, it seeks expert assistance from psychiatrists, sociologists, anthropologists, counsellors and social workers.

Profiles of recent Thoughtshop projects show an enviable track record for the Foundation.

(Please turn to the next page)

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Champa: Reproductive Health Teaching Aids Kit for Adolescent Girls

Developed by the Thoughtshop Foundation in 1996-1997 in collaboration with the Child In Need Institute in West Bengal, this teaching aids kit is meant to help health workers in generating awareness of reproductive health issues among out-of-school rural adolescent girls and women. The kit is available in three languages – Bengali, Hindi and English. It has been adapted for CARE-India's adolescent reproductive health projects in Madhya Pradesh and Uttar Pradesh.

In five modules, the kit visualises the story of a 12-year old girl named Champa. Each module consists of a flip chart with accompanying visual aids/activities. The modules are as follows: (i) Introduction – Ice-breaking – Self-esteem – Puberty; (ii) Menstruation; (iii) Conception – Sex Determination – Gender Issues; (iv) Family Spacing – Why?; and (v) Family Spacing – How?

The five flip charts of the Champa teaching aids kit deal with issues of self-esteem, puberty, menstruation, conception, sex determination, gender issues, contraception – why, and contraception – how.

CARE-India health workers and peer group educators in Jabalpur are seen participating in the field testing of the Champa reproductive health teaching aids kit for adolescent girls.

Needs Assessment Report for a Young People's Sexual Health Project in West Bengal

In collaboration with AIMS Research in Calcutta and with funding support from the West Bengal Sexual Health Project/ Department for International Development, UK, the Thoughtshop Foundation conducted a study of the sexual health problems and information needs of young people in urban and rural West Bengal. The study was conducted in March-April 1997, targetting both male and female adolescents in the age group 12-19, in-school or out-of-school.

The study involved a content analysis of letters received by the ASK column; focus group discussions; interviews with key personalities who exert major influence on young people; and an institutional analysis of sexual health services available to the target population.

The study's findings point to an almost total lack of awareness of sexual health issues and knowledge of the human anatomy among the target population and the people who influence them most (e.g. parents and teachers). Very often the very same people discourage young people's access to information about sexual health.

While the institutional analysis indicates some progress in the provision of sexual health services to young people (e.g. awareness programmes, counselling and condom promotion), access to reliable sources of information, including the mass media, is not available to many of them.

Shankar: Reproductive Health Teaching Aids Kit for Adolescent Boys

Currently being developed by the Thoughtshop Foundation in collaboration with the Child In Need Institute in West Bengal, this kit is intended to help peer educators in generating awareness about reproductive health issues among rural adolescent boys and men through discussions and other activities. Its central theme is men's responsibility for their sexual behaviour and the reproductive and sexual health of their partners.

In five modules, the kit tells the story of Shankar, a 13-year old boy. Each module consists of a flip chart and accompanying visual aids/ activities. The modules are as follows: (i) Puberty, self-esteem, responsibility; (ii) Knowledge of changes that girls experience during puberty; (iii) Childbirth; (iv) Contraception – why/how; (v) Safer sex, hygiene, STD/HIV/AIDS.

ASK Booklet for Young People

This 44-page booklet is a compilation of all 21 issues of ASK (AIDS, Sex, Knowledge), an interactive HIV/AIDS and sexual health awareness column produced by the Thoughtshop Foundation for young people. Published every third Thursday of the month in the *Voices* section of **The Statesman** newspaper, the ASK column was launched on 23 March 1995 and was published until 6 June 1996.

Readers responded to the column enthusiastically. Some 1,500 letters of support and constructive criticism were sent by parents, teachers and health workers.

Published in January 1999, the booklet tackles a wide range of issues, including self-esteem, puberty, menstruation, conception, contraception, STD/HIV/AIDS, condom use, sexuality, sexual abuse, and so on. The booklet is an informative reference for adolescents and health workers and a useful background material for reproductive and sexual health workshops conducted by NGOs, such as Parivar Seva Sanstha in Calcutta and MSRA in Patna, and various organisations such as the British Council in Calcutta. Copies are sold at Rs. 5 each at book fairs, schools and bookshops.

The ASK Booklet in use at a student workshop on sex education conducted by Parivar Seva Sanstha in Calcutta.

Benefits of SCERT training continue to trickle

A training programme on adolescence education conducted by SCERT in 1998 continues to yield benefits, reports Mrs. C.S. Unteks, Headmistress of St. Andrew's High School for Girls in Pune.

St. Andrew's School for Girls' street play.

Inspired by Dr. K.S. Gaikwad, Coordinator of the SCERT project, teachers who came to the training have incorporated training activities in their own teaching programmes. The activities include essay and poetry writing competition, drawing contest, and monthly education programmes for parents using skits, films, lectures and group discussions.

Activities held at St. Andrew's High School tackled the following issues: AIDS, a great disaster for human beings; male/ female equality; a peaceful life: relief from drugs; moral values of mankind; family: the foundation of society; and my idea of an ideal home.

Community participation has been very encouraging, with students, teachers, parents, government authorities and other members joining the activities with full physical, intellectual and emotional vigour. There is popular agreement among the community members that such activities are more effective than classroom/ textbook teaching.

Reaching adolescents: a role for radio

The radio is a powerful means to reach adolescents and to address their concerns, particularly those that are not being addressed by their families or by the school curriculum.

Proving this point is a radio programme, *"Sandhikhan"* (Bengali for adolescence), which aired on National Radio, covering adolescent health issues particularly reproductive health. The programme's impact was the subject of a WBVHA survey among adolescent radio listeners in West Bengal.

Seventy-nine per cent (369 individual listeners) of the respondents rated the radio programme 'very good', with only a negligible one per cent describing it as 'unnecessary'. Only 21 per cent of the respondents listened to the programme alone, with the majority listening in the company of friends, mothers, sisters, brothers, fathers, and other relatives. This suggested a wider group of listeners in addition to the programme's primary target audience.

Clearly, the findings pointed to the effectiveness of teaching adolescent health on the air and the role played by WBVHA in developing healthy attitudes and habits among its young audience. The survey findings will provide the basis for producing educational materials on reproductive health for students as well as teachers.

INDONESIA

An Indonesian self-help group fights a winning battle against alcohol, drugs and STDs

The youth and children of Warakas, a disadvantaged community in North Jakarta, are reaping the benefits of interventions by a self-help group organised by the Yayasan Kusuma Buana (YKB) to prevent alcohol and drug abuse and to provide education about STDs. The group, the first of its kind in Indonesia, is composed of 25 peer educators who have been trained in basic counselling skills and in the prevention of drug and alcohol abuse and STDs at the YKB clinic in Tanjung Priok. Further training is provided at the group's bi-weekly meetings, during which problems encountered in the field are also discussed.

Breaking the ice at the peer educator training in Warakas, North Jakarta.

Among the group's activities are the publication of a bi-monthly Bulletin, a poster contest, outreach programmes with social and religious organisations in Warakas, and awareness campaigns that have a multiplier effect. Peer educators are encouraged to bring a friend or two to monthly meetings organised by the group, for the purpose of teaching them alcohol, drug and STD prevention and convincing them to invite their own friends to the next meeting. While increasing community awareness, this facilitates the identification of potential peer educators.

The group attributes its success to the unconditional support by all members of the community who have been increasingly concerned about the rapid rise of drug and alcohol addiction in Warakas. The district government in Warakas, parent organisations, and local youth groups have also been very supportive. The group works in a donated office which serves as a "base camp" for all its activities, including meetings and training/counselling sessions. Electricity bills are paid by the YKB.

Base camp for youth and children activities in Warakas, North Jakarta.

Moved by the Warakas community's enthusiastic response, the group continues to initiate productive educational activities. It is hoped that the project will be replicated in other urban areas where alcohol and drug addiction and the prevalence of STDs are worsening.

Strengthening strategies to improve adolescent reproductive health through materials development

Since 1996, a three-year materials development project has concentrated its efforts in improving adolescent reproductive health in DKI Jakarta, DI Yogyakarta and West Java, where adolescent problems have been on the rise during the last decade; and in Lampang and Riau, which are generally known as vulnerable provinces where ARH problems are increasing.

What were the conditions that led to the project which is executed by BKKBN and implemented by PKBI (the Indonesian Planned Parenthood Association) and the Bureau of Non-Physical Family Resilience (BINOF)?

To cite some: the exclusion of sex education in the school curricula, the restricted availability of and access to information on reproductive health and family planning services for the youth, the limited range of activities by NGOs, such as the PKBI and NU.

Over the long-term, the project is focussed on raising the commitment of families (particularly parents) to instill in their children a better understanding of adolescent reproductive health concepts and desirable family values.

Over the short-term, the project is seeking to develop a basic IEC/counselling strategy and policy in support of a family-centred approach to adolescent reproductive health; promote better understanding of reproductive health needs of adolescents among policy makers, community leaders, parents and youth; and improving the IEC/counselling skills of personnel at the community level. It also hopes to provide information support to a related project on the strengthening of counselling services for families with adolescents and youth as members.

To achieve its goals, the following strategies have been adopted:

1 Preparation of a media development and production plan, taking into account activities of related UNFPA-funded projects being implemented at about the same time as this project;

2 Conducting a needs assessment to determine the progress made in promoting adolescent reproductive health and to identify priority needs in training and IEC;

3 Production of three types of materials sub-contracted with recognised media agencies or persons;

4 Implementation of three key activities: (i) set up a family centre for adolescent counselling on reproductive health in Lampung province and build a network in Riau (Batam) to serve the reproductive health needs of vulnerable groups; (ii) train 30 persons on family life education and sexual health, and repoductive health issues; (iii) carry out special programmes for vulnerable groups, such as women sex workers in Lampung and Riau provinces;

5 Periodic monitoring of activities by both PKBI and BINOF/BKKBN, including provision of necessary technical assistance.

LAO PDR

Lao Youth Union networks to promote adolescent reproductive health

The Central Lao Youth Union (LYU) is implementing the third component of the Reproductive Health Sub-Programme, which is supported by UNFPA and executed by JOICFP from 1998 to December 2000.

An aspect of the LYU's work is a collaboration with the National Statistic Centre in a KAP (knowledge, attitude and practice) study on reproductive health among adolescents and young people between the ages of 15 and 24.

The study's findings, to be published by the end of 1999, will provide data on their knowledge of birth spacing, contraceptive methods; their attitudes towards unwanted pregnancy, reproduction, STDs, HIV/AIDS and substance

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abuse; and common youth practices concerning heterosexual relationships, sexual relationships, discussions on sex, planning for marriage, and sex with commercial sex workers. The study will cover 151 villages that have been randomly selected from the country's 18 provinces, including Vientiane and one special zone. It will be carried out by 40 young, trained researchers. Two to four researchers will be assigned for each province.

The LYU is also collaborating with the Institute for Mother and Child Health, the Lao Women's Union and the Ministry of Education in developing a reproductive health manual to be used as reference material for LYU leaders and volunteers at the district and village levels. The manual will cover reproductive health-related topics, such as physical and psychological changes during adolescence, sexual health, pregnancy and ways to prevent unwanted pregnancy, HIV/AIDS/STDs, substance abuse and new lifestyle of young people.

A dissemination and training workshop on how to use the manual will be conducted for LYU leaders, volunteers and facilitators at district levels. The manual will be pilot tested in two LYU project sites, namely Savannakhet and Champasak provinces, and will be distributed once modifications are made based on the results of the pilot tests.

MALAYSIA

Promotion of adolescent reproductive health and healthy living

A three-year project, "Promotion of Adolescent Reproductive Health and Healthy Living," is moving ahead to achieve its four-pronged thrust: (i) development of a reproductive health of adolescent module (RHAM) for trainers and educators; (ii) training of trainers; (iii) sharing of ARH experiences in the ASEAN countries; and (iv) setting up three service models in Sabah, Selangor, and Terengganu to provide RH care to adolescents (10-19 years old) and youth (20-24 years old). The project, approved on 30 March 1998, is being implemented by the Federation of Family Planning Associations, Malaysia (FFPAM), with funding assistance from the UNFPA Country Office.

The RHAM provides a comprehensive treatment of seven adolescent-oriented concepts: understanding my body; taking care of my health; we are equal; reproductive rights and responsibilities; me and my values; my friends and I; and my family and I. Of these, reproductive rights and responsibilities and adolescent values are deemed particularly significant.

A draft of the trainer's manual (lesson plans), the first part of the RHAM, has been finalized and will be tested in a workshop. The second part, a teacher's guide, is under preparation.

The first in a series of training on the use of the RHAM will be a five-day national workshop for 50 teachers and educators, followed by several state level workshops for 150 teachers and 180 adolescent peer educators from state family planning associations.

An important South-to-South collaboration is a five-day inter-country workshop on the management of ARH, organised by the FFPAM for trainers from the ASEAN countries and local FPAs. The workshop will also promote the use and cost recovery scheme of the RHAM, while raising funds for the FFPAM.

The three service models have specific orientations. The Sabah model is setting up a youth clinic for adolescents within its existing clinic network. The Selangor/WP FPA is developing its Youth Resource Centre into a service model for training and youth involvement in RH activities, eventually introducing RH services into its programme.

The Terengganu FPA has developed a Youth Centre website which features the history, mission, and activities of the Terengganu FPA, an image gallery of FFPAM posters, feedback, and other State FPAs. Chat sessions began in August with two FPAs participating in the project.

Designed by an FPA member from Terengganu, the FFPAM-initiated youth homepage is managed by the Youth Club chairperson. Youth participation in its development is encouraged through contests, which have included the logo design contest and State FPA website design competition. The remaining sections, such as Youth Development and Our Corner, are awaiting construction and inputs from the youth are being solicited.

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MONGOLIA

Democratic reform paves the way for new reproductive health strategy and advocacy

In a big way advocacy has triggered Mongolia's adoption of a National Adolescent Health Programme. Much now depends on how advocacy can assist in raising and sustaining reproductive health awareness among policymakers and the general public. The point is made by Ms. Munkhuu, senior adviser to the RH Advocacy Project in Mongolia.

"Hot line service"

Ms. Munkhuu associates the Programme's beginnings with the adoption in 1997 of the National Programme in Reproductive Health, which made adolescent health issues, including reproductive health, a public concern. To facilitate its implementation, formal health education has been incorporated in the secondary school curriculum, following an order passed by the Education Minister in April 1998.

Ms. Munkhuu also cites the impact of the Adolescent Health Education Project funded by WHO, the Reproductive Health Advocacy Project, and the UNFPA-supported Adolescent Reproductive Health Project, which has enabled the training of 15 master trainers, 25 school teachers, and 25 NGO staff as sexuality educators. In addition, the project is developing training packages and background materials for teachers. Since August 1998, a quarterly newspaper for adolescents *Uerkhel-Love* has been published and educational programmes on adolescent sexuality have been produced for radio and television.

Race against STD/AIDS

Describing other developments, Ms. Munkhuu reports that a hot line service in Ulaanbaatar has been started by an NGO, Adolescent Future Center, in collaboration with the UNDP Office in Mongolia and the Ulaanbaatar City Mayor's Chancellery, which provided financial support. Additional support came from a charity race to raise funds for STD/HIV/AIDS, which was organised by the Netherlands Embassy in June 1999 in Ulaanbaatar.

A trained doctor and volunteer medical students operate the hot line service daily from 8 a.m. to 8 p.m. They provide counselling and moral support and make clinic referrals to adolescents requiring antenatal care or STD services. However, their work is constrained by the lack of telephone services in underprivileged areas, the limited number of telephone lines to access the hot line service, and the unavailability of contraceptives and STD diagnostic services to offer the callers.

Participants of the RH advocacy training during a field visit in Ulaanbaatar.

In conclusion, Ms. Munkhuu stresses the need to make the National Adolescent Health Programme more effective and responsive by improving the country's information system and by increasing reproductive health awareness among policy makers and the general public. Advocacy training must be actively pursued, she adds, suggesting incorporation of the following topics: basic elements of advocacy, identifying advocacy needs, advocacy objectives, target audience, developing and delivering policy documents, media role in advocacy, and monitoring and evaluating advocacy.

Field visit to the "Hot line service" during the RH advocacy training.

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PHILIPPINES

The Davao Teen Centre empowers the youth of Mindanao

Since its start ten years ago, the DAFLEY Project (Development and Famity Life Education for the Youth), based in Davao City, has kept to its mission: to make the youth "enlightened citizens of the future" by teaching them reproductive health, gender equality and responsible parenthood. Established by the Family Planning Organization of the Philippines, the DAFLEY Project is being carried out through the Davao Teen Centre (DTC) which provides reproductive and sexual health care services through counselling, face-to-face or by telephone. Peer counsellors are trained in human sexuality, counselling, values formation and communication, in a three-day workshop, preparing them emotionally, psychologically and even physically for the rigorous tasks ahead.

The Centre's relaxed atmosphere and the friendliness of the peer counsellors have made the DTC a favourite hangout for teenagers. On the average, the Centre receives 120 to 125 calls a month and up to 25 walk-in youth, particularly on weekends. To accommodate youngsters who are too shy to come to the Centre, peer counsellors arrange to meet them elsewhere. Counselling hours have been extended to 8 p.m.

In an effort to reach out to more teenagers in Mindanao, the DTC last year introduced a radio programme, "Love Letters Straight from Your Heart". The programme airs over DXBM on the FM band, Monday to Saturday, from 1 p.m. to 2 p.m. Public response has been enthusiastic; thousands of letters have been received from various parts of Mindanao, requesting advice on various aspects of boy-girl relationships, same sex relationships, unplanned pregnancies, and other topics. The letters are read on-the-air by a disc jockey and advice is provided by a DTC peer counsellor. Listeners are then invited to phone-in their opinions.

Another radio programme, "Love, Sex, Marriage and Career", discusses more complex and serious problems with the help of professional guidance counsellors from reputable colleges and universities in Davao. The programme, which is coordinated by DTC peer counsellors, airs over DXRP every Saturday from 9:00 p.m. to 10:30 p.m.

There are plans to replicate the counselling programmes in a sister company of DXBM on the AM band.

Youngsters who have benefitted from DTC counselling refute a conservative belief that sex education leads to promiscuity and sexual experimentation. They cite the respect that they have for their bodies and their sense of responsibility as proof of the value of the reproductive health education and services that they have received.

Resisting risky sexual activity: SHINE project shows how

What good is a catchy acronym? A lot, going by the experience of SHINE, which has been stirring public interest since its launch in July 1998 in urban Cagayan de Oro.

SHINE stands for "sexual health initiatives through networking and education", an eighteen-month project on reproductive health for young adults (13-25 year olds). A project of CARE-Philippines, it targets the two most likely places to effectively reach large numbers of youth: the school and the workplace. The project was completed in December 1999, having made significant achievements in increasing the youth's knowledge of important reproductive health issues and enabling them to make informed decisions about their reproductive life. The project has also established a referral network of service providers to ensure sustainable access to quality reproductive health services.

The project's underlying belief is that informed choices, skills building, support structures and networking are the tools to develop responsible sexuality.

The SHINE Project addresses constraints to promoting adolescent reproductive health in the Philippines.

Discussing sex is taboo in traditional Philippine culture, even at home, which is a potent source of information. This leaves the school and workplace as the next most effective providers of information. CARE-Philippines through the SHINE

Reprohealth Knowledge Bowl contest sponsored by CARE-Philippines.

Project seeks to ensure that information provided to young people is accurate and honest.

The SHINE Project encourages the involvement of the youth, school and community through the parents and other concerned organisations/ agencies. It enables the youth to increase their knowledge and to focus on values that would guide them in making the right decisions about their reproductive life.

The SHINE Project does not limit teaching to imparting knowledge and transforming values but also includes providing necessary negotiation, communication and relationship skills that enable teenagers to apply those values. Knowledge must translate to skills that empower.

The SHINE Project provides supporting structures for the young, including youth-friendly medical facilities that offer counselling and medical services.

The SHINE Project is supported by corporate partners, high schools and health service providers.

SRI LANKA

Giving adolescent reproductive health and population issues a world view

The Colombo-based Worldview International Foundation is deploying television advocacy to address reproductive and sexual health and reproductive rights issues.

Under the project, *Television Advocacy Programme for Adolescent Reproductive Health and Population Issues*, Worldview will produce 52 video programmes on themes chosen by the UNFPA and relevant NGOs and institutions. Priority is placed on reproductive and sexual health and family planning activities that are supportive of national population policies. The programmes will cover country experiences in Asia and other regions.

Once the stories are approved, script writing and recording of raw material will commence. Video editing will be done at the YA*TV Central Editing Unit in Colombo. Modifications will be made to suit the video programmes' specific target audiences.

The video programmes will be broadcast through YA*TV, which covers 18 countries in Asia and reaches over 385 million viewers, and other channels. They will be distributed through the Worldview network of over 1,000 grassroots NGOs and CBOs. In its first year, the project is expected to reach Bangladesh, Cambodia, Laos, Nepal, Pakistan, Sri Lanka and Vietnam. Coverage will extend to China by the end of 1999 and to other South East Asian countries by 2000 onwards.

Worldview and YA*TV

A pioneering organisation in development communication, the Worldview International Foundation is recognised for the highly innovative Young Asia Television (YA*TV) which it established in 1995 to provide information and education to the Asian youth. YA*TV covers Asia-focussed environmental concerns, news and current affairs for the youth, and women's problems. In addition, it produces in-depth analyses of child poverty, illiteracy, sustainable development, arts, culture, and other issues.

Complementing the EC/ UNFPA RH Initiative

The Worldview project complements special strategies under the European Commission/UNFPA Initiative for Reproductive Health in Asia, established in 1997. The Initiative's particular concern is the creation of sustainable mechanisms to respond to the unmet demands of vulnerable groups and deprived populations. It promotes the development of suitable alternatives to current systems that will contribute to declines in fertility rates and mother and child morbidity and mortality.

To-date, the strategies under the EC/UNFPA RH Initiative have included the following: *Community participation in full RH services in Nepal and Pakistan; Adolescent reproductive health in Cambodia, Laos, Sri Lanka and Vietnam; and Improved quality of RH care in Bangladesh.*

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Worldview's Goals

By promoting the global dissemination of information and education, the Worldview Project seeks to (i) strengthen young people's participation in IEC processes; (ii) advance TV media advocacy to provide comprehensive messages about health and safer sex, reproductive health problems, reproductive rights, population information and the serious issues of trafficking in women and abuse of children; (iii) advocate the inclusion of population, gender, sexual and reproductive health issues in the school curricula, while maintaining cultural and religious integrity; (iv) provide extended knowledge of adolescent reproductive health to all concerned groups and promote responsible and healthy sexual and reproductive behaviour among the youth and adolescents; (v) encourage positive attitudes towards preventive methods among the target groups, parents, teachers and the larger community and develop their behavioural skills to promote safer sexual practices; (vi) promote the importance of incorporating gender perspectives and child abuse issues in all youth and adolescent-related activities; and (vii) establish close co-operation, through the Worldview NGO network, among organisations at the national, regional and international levels, youth groups and NGOs involved in sexual health and the prevention of HIV/AIDS and child abuse.

VIETNAM

Supporting national education and training in RH and population/development

The Ministry of Education and Training (MOET) is implementing a project, "Support to national education and training programme on RH and population/development" at the request of the Ministry of Planning and Investment. Executed by UNFPA, UNESCO and the Government of SR Vietnam, the project has a duration of two and a half years, starting in August 1998. Its long-term objectives are two-fold:

Population education: To enable students, at all levels in all types of schools, to understand population, reproductive health, and adolescent issues, and to make better life decisions.

Population and development training: To strengthen national population training programmes for students, researchers and government personnel in population and development planning and research, and to develop a cohort of trainers by improving the quality and content of national training programmes.

Relevant Publications

The Adolescent Reproductive Health Education Training Manual. This publication consists of 12 modules, each divided into two parts. Part I focuses on improving the teachers' understanding and knowledge. Part 2 introduces the subjects to young people, in- or out-of-school. The modules are as follows: introduction to the training course; adolescence; friendship, love and parenthood; sexuality and reproduction; early pregnancy and contraceptives; adolescent health; gender equality; adolescents and children's rights; parents, family and the community; population and development; population policies in Vietnam; and from family planning to reproductive health.

The training approaches include presentation with the active participation of learners; brainstorming; inquiry/discovery approach; problem-solving; value clarification; group work; role-play; and simulation game.

Guidebook for Provincial Facilitators to Teach the Trial Version of the Course: How to Teach Sensitive RH Topics. This 12-part guidebook opens with an overview of the course, describing and assessing the objectives, followed by a course plan. Part I includes an introduction for the facilitator and detailed schedule; Part II includes an introduction for the facilitator (basic structure and management); lesson plans and participatory methodologies; discussion following the practice teaching; and instruction for small groups for each lesson practice session. Part III consists of nine short sessions and a detailed schedule.

References for the opening sessions cover problems and data concerning selected reproductive health topics; reproductive health and rights; similarities and differences between population education and sex or repoductive health education; and participatory teaching methodologies. Additional lesson plans and lesson ideas are provided.

Its short-term objectives cover improvements to the teaching of population education; integration of population education into technical and continuing education programmes; expansion of teachers' roles as reproductive health counsellors/trainers; strengthening the MOET's capacity to manage and plan population education and population/development activities; improvements to the curriculum in population and development, as well as to the training and research capacity in this field.

The project's outputs by 1999 include a test item bank (27 books/ 1,600 items); posters for POPED teaching-learning (168); self-learning with guidance course book; trainers' guidebook on methods for teaching sensitive RH topics; POPED curriculum for the Master's, continuing education, and technical school levels; course book on POPED for the Master's degree (13 books); POPED guide for teachers of continuing education and technical schools; trainers' POPED guide for continuing education; handbook of linkages between schools and non-school institutions; draft handbook for POPED managers; and videos of lessons on participatory methods.

Survey reveals slow strides in promoting adolescent reproductive health in Vietnam

by Dr. Nguyen Minh Thang (Ph.D.), member of the National Committee for Population and Family Planning and Population Research Consultants

In Vietnam, the sheer size of the adolescent population (some 12-13 million) provides a compelling argument for promoting adolescent reproductive health. However, a number of obstacles have set back efforts.

The UNFPA-funded project VIE/97/P12 is one of several initial efforts by the Vietnamese Government to promote adolescent reproductive health knowledge. An ARH mass media campaign implemented under the project focusses on promoting friendships, pure love and safe sexual behaviour and on increasing adolescents' access to RH services.

According to a survey report, only 53.8 per cent of the target group knew the term "reproductive health" prior to the first EC campaign in 1998. The figure rose to 95 per cent after the campaign. However, there remains a great demand for reproductive health information among adolescents. An evaluation of the first campaign showed that approximately 40 per cent of adolescents require more information. Another study, project VIE/97/P11 recorded a higher figure of 72.8 per cent. Under this project, a national contest and the second campaign on reproductive health were organised.

To gather information for monitoring the adolescent reproductive health programme, Population Research Consultants recently conducted a survey. The findings revealed the following setbacks:

Adolescents favour radio, TV and newspapers as sources of RH information.

While radio, television and newspapers are the most popular channels of information, inconvenient broadcast schedules discourage adolescents from relying on community radio broadcasts for RH information.

Adolescents have no knowledge of pregnancy, STDs, and HIV/AIDS prevention.

Sixteen per cent of the respondents say they do not know how to prevent pregnancy and 13.5 per cent say they do not know how to prevent STDs, including HIV/AIDS.

The demand for RH information varies according to the socio-demographic characteristics of respondents.

Most of the male adolescents are interested in information concerning sexuality, STDs, contraceptives (especially condoms), and other sex-related matters. However, they are reluctant to solicit this information from their parents and teachers.

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While the majority of adolescents do not favour pre-marital sex and pre-marital pregnancy, their choice is to keep and deliver the baby in case of pre-marital pregnancy.

While 72.8 per cent of the respondents do not accept pre-marital pregnancy, 47.8 per cent favour keeping the baby in case of pre-marital pregnancy, compared with 14.8 per cent who favour abortion.

Adolescents give a poor rating to the quality of RH/FP services at the centres.

Adolescents demand better RH/FP services than are currently offered at the centres. To achieve successful results for the project, "Supportive promotion for adolescent reproductive health", adolescent RH awareness should be raised and they should be provided adequate information on reproductive health care services. All in all, greater addition should be given to the needs of adolescents.

Adolescents need to further understand RH but, not knowing its meaning, they cannot tell what type of information they require.

Seventy-eight per cent of the respondents want to obtain more information about RH. 18.2 per cent do not know what information they want, while 49.4 per cent say they need information about RH in general. Those who have heard of the first IEC campaign about ARH demand further information about this issue.

Adolescents have poor knowledge of adolescent reproductive health.

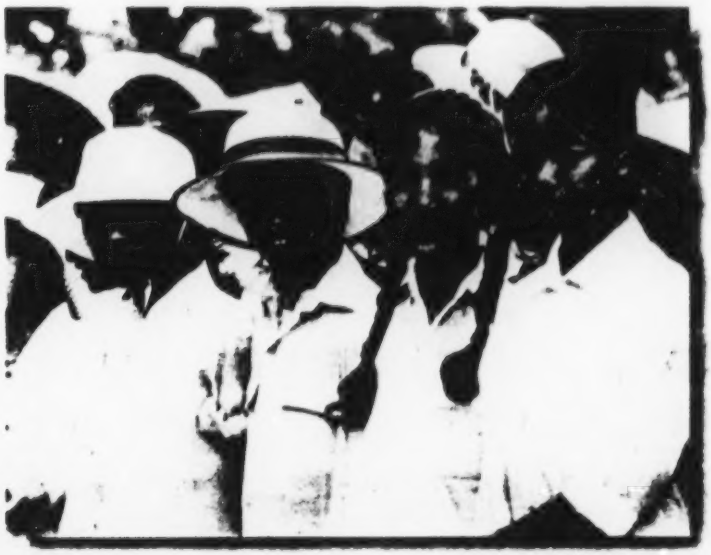
The majority of the survey respondents (67.3 per cent) do not know the meaning of RH or do not remember coming across the term. Among those who know the term RH (32.7 per cent), 21.8 per cent do not know its meaning and 78.2 per cent have limited knowledge of the contents of RH.

Friendship and love are often discussed among adolescents, but sexuality rarely is.

The majority of the respondents (93.2 per cent) exchange views with friends about friendship, 44.1 per cent exchange views about love, and 15.1 per cent about sexuality. The age group 19 and above talk about sexuality more often than the younger group (29.9 per cent vs 5.9 per cent). Some 18.1 per cent of male adolescents discuss sexuality, compared with 11.8 per cent of females.

Adolescents have poor knowledge of RH and poor interest in RH/FP service facilities.

Of the respondents who know of at least one RH/FP health centre (52.2 per cent), 10.6 per cent have visited the centre and 11.4 per cent are aware of the types of services offered. Nearly 50 per cent of the respondents know of the services provided at RH/FP centres (317 out of 677), compared with 38 per cent who do not know what services are available. Few respondents know the specific types of services, with contraceptive services (which reach 38.6 respondents) being the most frequently mentioned. Primary health care for mother and child is known to 19.7 per cent, abortion to 11.3 per cent and delivery to 9.9 per cent.



Credit Photo: Roger Lemoyne, UNICEF.

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Next time somebody asks: "Is it good for young people to watch TV?" say YA

YA*TV, the Young Asia Television: the eyes and ears of young Asians

Millions of young television viewers in Asia have the Young Asia Television (YA*TV) to thank for their education. Utilising land-based and satellite networking, the YA*TV channel, Network for Asian Youth, reaches 250 million viewers in South Asia, 135 million in South East Asia and 24 million in the Middle East, bringing them news and analysis of Asia-focussed environmental concerns, current affairs, population and reproductive health issues, social problems including poverty and illiteracy, arts and culture, and other topics.

YA*TV also broadcasts programmes produced by different countries on reproductive and sexual health, AIDS/STD prevention, and youth/adolescent awareness of sexual health.

Worldview International Foundation, an international NGO that has consultative status at the United Nations and is headquartered in Colombo, Sri Lanka, brings 20 years of experience in training, programme production and broadcasting to YA*TV. The Foundation launched the highly innovative programme in October 1995, driven by a simple thrust: "Television must encourage dialogue and debate; advance the creativity of people, especially the younger generation who will be the leaders of the future."

Dr. Federico Mayor, Director-General of UNESCO, salutes the important role of YA*TV. "YA*TV is a valuable instrument in turning the mentality of war into a culture of peace and tolerance. This important initiative to bring alternative television programming for young Asians deserves our full support."

The Foundation further asserts that television attracts greater public attention to issues of equality in the home and in public life, and provides young people with new images, ideas and ideals. It also gives women, the youth and children an opportunity to have their voices heard. The Foundation considers it essential to democratise television communication, to produce more quality development-oriented TV programmes that incorporate discussion and interaction to obtain the people's stories and inputs, and to ensure that they are responsive to the people's needs.

YA*TV programmes are made available on as wide a network as possible to counteract the proliferation of mass-produced, low quality and low-value mass media. Many television channels are flooded with poor programmes that negatively influence young people's standards, values, and behaviour.

To reach many more millions of viewers, YA*TV programmes are networked with the Asian Broadcasting Union, of which the Foundation is a member, and to 1,000 other organisations through the Foundation's own NGO network. Efforts to network its media centres are underway.

YA*TV programmes are produced in English, Thai, Tamil, Bahasa Malaysia, Urdu, Arabic, Hindi, Khmer, Vietnamese, Nepalese, and Sinhala. By late 1999, broadcasts are expected to include Chinese and other major Asian languages.

YA*TV will also be the outlet for the 52 video programmes being produced by the Foundation under the project, *Television Advocacy Programme for Adolescent Reproductive Health and Population Issues*. The video themes will be chosen by UNFPA and relevant NGOs and institutions, with priority given to reproductive and sexual health and family planning activities that are

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supportive of national population policies. However, the video programmes will not be limited to Asian experiences, but will include those of other regions. Initially, the programmes will be broadcast in the local languages of the seven countries participating in the project, namely Bangladesh, Cambodia, Laos, Nepal, Pakistan, Sri Lanka, and Vietnam. Future broadcasts are expected to reach Laos, China, Latin America and the African Continent.

A pioneer in development communication

With support from UNFPA, SIDA, UNICEF, IPPF, NORAD and other agencies, the Foundation has been implementating development communication activities in population concerns in Asia, Africa and the Middle East, since 1980. Its programme initiatives are project intervention strategies aimed at reaching specific target groups via a multi-media approach.

YA*TV is managed by Worldview Global Television, which has been set up between Worldview and like-minded private sectors to help ensure its financial viability.

Television educates while it entertains

The Foundation's network provides the medium for value-based broadcasts in an entertaining fashion. Financial benefits accrue from producing and broadcasting powerful programmes with meaningful educational entertainment to a well-defined market.

The beneficiaries are millions of young men and women who have poor fundamental knowledge of sexual and reproductive health and other topics. Young people below the age of 24 represent 54 per cent of the world population. Many have poor access, if any, to healthy and complete sex education. In many countries, high rates of teenage pregnancy and sexually-transmitted diseases have led to increased rates of maternal morbidity, including deaths due to illegal abortions, and the spread of HIV/AIDS. The inter-relationship between contraception methods, pregnancy, gender relations, sexuality, fertility and HIV/AIDS has a powerful effect on country socio-economic factors, including population growth and environmental deterioration.

The International Office of Worldview International Foundation in Colombo monitors programme activities on a continuing basis and uses the information gathered for impact assessment and long-term planning. The productions are scrutinized by top international journalists in many Asian countries and by experts from international TV channels. Particular attention is given to participatory communication to ensure that the YA*TV project objectives are met.

A telling measure of YA*TV's success is the skills and knowledge enhancement achieved by the target viewers. The significance will be seen in the strong impact on national, regional and global development issues.

Education-entertainment strategies utilising television and other media have been successful in many countries in the promotion of family planning, improving the status of women and other related areas. To be sure, YA*TV's innovative programmes have made information and services appealing and accessible to youth as well as to adult audiences.

What's showing on YA*TV?

YA Cafe focusses on the lighter side of young people's lifestyles. For starters, try Korean art; for the first course, a little Mongolian cookery or a peek at Singaporen fashion; have as main course hot air ballooning in Nepal; and for desert, enjoy the music of the Indian Ghazal Singers. Produced in a relaxed, casual style, *YA Cafe* is an interesting introduction to the culture and sophistication of modern Asia. It keeps its finger on the pulse of the youth and is a hit with today's young persons.

Nature Calls offers exciting half-hour journeys through Mother Earth, from the rainforest of the Amazon to the plains of the Serengeti; from the peaks of the Himalayas to the coral reefs of the Maldives. *Nature Calls'* TV cameras roam the world in search of stories that depict nature at its best and show how efforts to achieve its sustainable use, complemented by the deployment of science and technology, are helping to preserve Mother Earth. The "Eco-Warrior" segment brings inspiring stories of people who are actively involved in the care and preservation of our planet.

I-Zone offers informative documentaries that highlight important issues. The stories go beyond the ordinary and offer fresh insights and knowledge of the world. Old and new facets of our history and culture are featured, including the daily life of people in the Lost Kingdom of Mustang and the story of the boat gypsies of Bangladesh. No story is too tough or controversial for *I-Zone*. It tackles such issues as the impact of economic growth, the drug trade, human rights abuses, sexuality and other difficult topics.

YA Tribe – Vibes from the Tribe. People of different races, religions, and cultures make up the Asian tribe, the world's largest. YA-Tribe emphasises the similarities and differences that make Asia the world's most culturally diverse continent. These are conveyed by presenting Asian poetry and art, the gateways to understanding any culture, combined with scenes that depict gender issues, levels of socio-economic development, and so on. A special segment, *"The Gong"*, promotes traditional Asian music and art and explores the fascinating fusion of eastern and western music and art forms.

Space to Let: Provocative and enterprising, this programme looks at the world from the perspective of women. The programme profiles successful and courageous women who have risen above stereotypes and overcome cultural barriers to achieve their full potential. Witty, thoughtful, and full of life, *Space to Let* is the space to be.

THE FOUNDATION FOR ADOLESCENT DEVELOPMENT

Best Practices

A SURE THING, NOT JUST A FAD: Youth-to-youth approach to health and sexuality issues

Five colleges and universities are participating in a project, "Capability-Building of Colleges and Universities in Metro Manila on Adolescent Health, Sexuality and Development", developed by the Foundation for Adolescent Development, Inc. (FAD). The five partner schools are Arellano University, Manuel Luis Quezon University, Polytechnic University of the Philippines, Systems Technology Institute and the University of the East.

Their consensus: Peer education is a sure thing, not just a fad.

A common thread that runs through the work of the Foundation for Adolescent Development, Inc. (FAD) is the mission to "help young adults develop their potentials in becoming whole and emotionally secure through proper value formation, thereby making them self-reliant and productive individuals and responsible members of the community."

Since its establishment 14 years ago, FAD has been addressing adolescent health and sexuality and development issues, running programmes and services that are dedicated to promoting and popularising the view that sexuality covers the total development of a person. An example is the UNFPA-funded FAD project, "Capability-Building of Colleges and Universities in Metro Manila on Adolescent Health, Sexuality and Development".

Based on FAD's experiences in running the Manila Centre for Young Adults (MCYA), a student resource centre set up in 1984 in Manila's university belt, the project utilised a "peer education" or "youth-to-youth" approach to provide information, counselling and referral services on health and sexuality issues. The project, also known as the "Campus-Based Model", was developed in 1996 and implemented in 1997.

FAD took various steps to put the project in place – from advocacy to schools and needs assessment, from training student leaders in adolescent health, sexuality and development, planning and counselling to touring referral agencies.

FAD's Innovative Strategy

In terms of target implementors, the project involved two sets of students. One group consisted of student leaders from various organisations who were selected by the school administration. The other group consisted of selected students who became peer facilitators and counsellors under the umbrella of the school's guidance programme.

As an innovative strategy in reaching out to adolescents, the campus-based model has these unique features: (i) it is campus-based yet uses an off-classroom approach; (ii) it is a youth-to-youth intervention; (iii) it calls for understanding and management of adolescent health and sexuality; (iv) it fosters a sustainable mechanism through the possible integration of these concerns in student organisations; and (v) it is led, implemented and evaluated by students.

FAD's implementation of the project has yielded varied experiences, as it has had to apply the model to the specific settings of the five participating colleges and universities, adopt innovative strategies suited to each, and learn different sets of lessons. These are reflected in the following work areas: needs assessment research, advocacy, capability-building, emergence of core group structure, programme sustainability mechanism, and evaluation.

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A youth-to-youth approach to promote health and sexuality issues among university students.

Documenting FAD's Experience

FAD's experiences are documented in a book, **A Resource Book on Adolescent Health, Sexuality and Development: A Youth to Youth Model,** developed and produced by FAD with financial assistance from UNFPA and the Commission on Population of the Philippines. The book is divided into two parts: *Part I, The Campus-Based Structure Capability-Building Model,* is made up of three section: (i) The Project Concept, details the campus-based model, its concept, objectives, and strategies; (ii) The Capability-Building Framework, describes the model's components and the theoretical basis of the framework; and (iii) Experiences in Implementing the Model, discusses the application of the model to site-specific settings and the innovative strategies adopted by each as well as the lessons learned.

Part II, Appendices, contains the training modules, the action plans developed by the student leaders as a result of the training workshop, a directory of service providers, a summary of student-led activities implemented in the five partner-schools, highlights of the Student Congress and a sample of the students' resolutions. These supplements are provided as reference materials.

The book's target readers are student leaders, peer facilitators, school administrators, guidance counsellors, agencies with services and programmes for adolescents, and professionals who are interested in working in the field of adolescent health, sexuality, and development or who want to pursue a similar programme or to replicate the model in their particular settings.

ADVOCACY

FAD's specific experiences concerning advocacy to school officials [illegible] has been excerpted from the aforementioned resource book.

Exploring partnership and advocacy to school authorities

Before concluding its partnership with the five partner schools, FAD conducted individual consultations and negotiation meetings with the eleven non-CEAP colleges and universities in Metro Manila. CEAP stands for the College Education Association of the Philippines.

The majority of colleges and universities approached were receptive. Some school officials saw the project as an appropriate and timely intervention to ease the shortage of guidance counsellors, citing 4:30,000 as the ratio of guidance counsellors to students.

FAD wrote a formal request to the respective presidents of the five partner schools, seeking a meeting to formally introduce the campus-based project. The presidents then designated school officials as their representatives to meet with FAD. They included the dean of student affairs and community service, the dean of students, the guidance department chief or officer in charge.

While acknowledging FAD's potential in helping to create programmes tailored to student needs, the student leaders and school officials raised certain fears and doubts about the project. They cited the following points:

- problems related to boy-girl relationship, intimacy, and sexuality do not prevail in their school;
- giving information on sexuality and reproductive health might lead to promiscuity;
- FAD might use these schools to source funds for itself;
- the school lacks resources for a counterpart fund;
- school activities can be done only on Saturdays so as not to conflict with academic classes;
- a leftist group might penetrate the project;
- the Office of Student Affairs of a particular school is undergoing restructuring; and
- provisions in the memorandum of agreement (MoA) are one-sided, in favour of FAD.

The roles of partnership: clarification and agreement

Through meetings and consultations with each participating university, FAD clarified the role of the partnership and produced an agreement. An MoA signed with each institution sealed the partnership, having cleared earlier doubts and misunderstanding. Thus, in consultation with each partner FAD revised the contents of the agreement and referred to the document as a letter of understanding.

FAD's roles:

- conduct series of consultations, meetings, and pre-orientation sessions with presidents and university administrators, and designate departments to orient them about the campus-based project;
- conduct a needs assessment research to identify problems and concerns related to adolescent health, sexuality and development drawn from the perceptions of students and school authorities;
- conduct capability-building activities like orientation workshops and training in adolescent health, sexuality, and development for student leaders and peer facilitators/counsellors;
- provide technical assistance in the formulation of action plans, implementation and evaluation of project activities for student leaders and peer facilitators;
- assist the universities/colleges in monitoring the implementation of the students' action plans, and other technical assistance needed by the students in relation to the implementation of the adolescent health, sexuality and development programme;
- in partnership with the participating universities/colleges, initiate quarterly meetings with school officials/heads and design a feedback mechanism among student organisations involved in the project;
- provide the universities the opportunity for networking and referrals through agency visits; and
- produce a resource book to document the various approaches used by the participating universities/colleges, serving as models for possible replication in other schools.

The roles of universities/colleges:

- ensure the participation of student organisations in the project;
- approve the action plans prepared by the participating student organisations;
- provide the venue for coordination, meetings, focus group discussions, and other dialogues;
- provide the project adviser(s) who would give administrative support to the FAD team in the implementation of project activities;
- identify student organisations, student leaders, and peer facilitators/counsellors who would participate in the training activities; and,
- together with FAD, monitor the execution of the student leaders' action plans.

The student leaders and peer facilitators' tasks:

- design and implement action plans in relation to the adolescent health sexuality and development programme; and
- participate in meetings, consultations, training activities, feedback sessions, and other activities initiated by FAD or the university/college where they belong.

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Advocacy and Negotiation for Partnership: Lessons and Insights

Dealing with school bureaucracy

Armed with its sincerity and backed by the respected names of its board of trustees, FAD overcame the schools' bureaucracy, established its credibility and earned the acceptance of the school officials. In the past, these schools were infiltrated by elements with different interests, false information or wrong values. FAD came under the scrutiny of the school officials; its background and motives were investigated.

Different approaches and levels of negotiation

The treatment given to adolescent issues varied from university to university. Of the 11 universities and colleges approached by FAD, seven considered the project as the domain of the Guidance Department while four delegated it to the Dean of Student Affairs. FAD has had to devise different strategies in dealing with each university. In the process, it discovered "political/administrative" dynamics between some guidance offices and offices of student affairs. The set-up affected the implementation of the project as it created miscommunication. In one school, FAD was first referred to the Guidance Department and later to the Office of Student Affairs (OSA). In another university, it never reached the OSA. Different organisational structures were developed, illustrating variations in FAD's approaches to the five partner institutions.

Presence of pro-student university officials

The presence of pro-student school officials and heads facilitated FAD's entry and the establishment of the partnership. Despite the reluctance of some officials to discuss sexuality issues, they welcomed FAD and the benefits that it will bring to the students.

Flexibility in dealing with particular universities

FAD learned to be flexible in dealing with the particular situations of the five universities, some of which felt threatened by the terms of the memorandum of agreement, resulting in modifications.

At its completion, the project is expected to have reached at least 30 per cent of the combined student population of the five participating colleges and universities with messages on responsible adolescent sexual and reproductive health behaviour and the provision of appropriate health counselling services.

Over the long-term the project's lasting impact will be seen in improvements to the reproductive health of Filipino adolescents. Statistics reported in the 1994 Young Adult Fertility and Sexuality Study (YAFSS II) of the University of the Philippines Population Institute paint a rather grim picture at present.

Some highlights

Of the country's total population of 70 million people, 49 per cent are below 20 years old. Of these, 20 per cent make up the 15-19 age group. Eighteen per cent or 2.5 million of those aged 15-24 had engaged in premarital sex. Among those who are 21 years old, 82 per cent of females claim to be virgins, while only 55 per cent of the males admit to the same status.

Premarital sex is not a one-time experience but is usually repeated. Seventy per cent of the girls engage in repeated sex with the first partner, while 62 per cent of the boys engage in repeated sex with at least another partner. About five per cent of the adolescent population are already in live-in arrangements.

The average age at marriage among women is 24 years old, and 26 years among men. In the age group 20-24, almost 30 per cent are married before they reach age 20.

Dynamics of Relationships Among the Major Actors in the Project

Foundation for Adolescent Development

- Pre-operational research
- Advocacy and partnership
- Technical Assistance
- Training
- Networking
- Monitoring
- Evaluation
- Production of resource book
- Student congress

Students

- Design and implementation of action plans
- Conduct group discussions
- Counselling
- Participation in consultations, training, feedback sessions

School Administrators

- Selection of student organisation for participation
- Approve action plans
- Provide venues of activities
- Assign faculty advisers to the project
- Monitor with FAD

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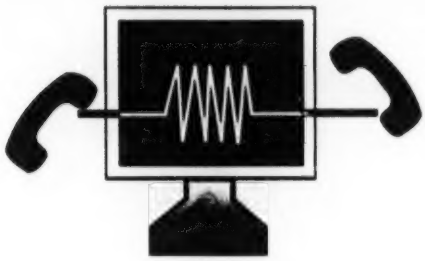

Thoughtshop Foundation

Any good thing I can do for any human being, let me do it now. . .

Thoughtshop Foundation

http://www.indev.nic.in/thoughtshop
2G Maurya Centre,
48 Gariahat Road,
Calcutta 700 019, India
E-mail: thotshop@cal2.vsnl.net.in

This website is a one-stop shop for social communications needs to promote public health and public welfare, with particular focus on training in adolescent sexual health and reproductive health issues. The website points to its anti-drugs mass media campaign as its launching pad. The "experience section" describes the Thoughtshop Foundation's planning and implementing activities, including the following: (i) ASK (AIDS, Sex, Knowledge), an interactive newspaper column for young people on sexual health awareness, published in the junior section of the newspaper, *Voice*. The columns deal with self-esteem, puberty, masturbation, menstruation, safe sex, contraception, condom use, STD/HIV/AIDS, pregnancy and sexuality; (ii) ASK booklet, a compilation of 21 issues of the ASK columns, distributed through schools, bookshops and book fairs; (iii) Study of sexual health problems and information needs of young people in West Bengal; (iv) *Aakrant*, a video film on HIV/AIDS awareness for industrial workers; (v) development of communication materials on "sex trade and law" for peer educators; (vi) Champa Kit, a reproductive health teaching aids kit for out-of-school adolescent girls in rural areas; (vii) Shankar Kit, a similar kit for rural adolescent boys; and (viii) a video film on HIV/AIDS awareness for truck drivers.

In other sections, the website provides a listing of on-going projects, publications, future plans, and quiz of the month. This information-rich website details the Foundation's projects, publications and outputs. An interactive section invites adolescent viewers to participate in the "quiz of the month" and to suggest activities that Thoughtshop Foundation can adopt. The easy-to-navigate site provides complete text of various materials.

Youth Towards the Next Millenium

http://www.ffpam.org.my/youth
Federation of Planned Parenthood Associations of Malysia
81B Jalan SS 15/5A,
Subang Jaya, 47500 Petaling Jaya, Selangor, Malaysia

A website within the Federation of Planned Parenthood Association of Malaysia, the youth homepage is a new and fast-growing site that disseminates information of interest to the Association's Youth Club members. The first page is attractive, interactive and provocative. It poses questions that invite feedback with regard to real-life problems faced by the youth, including boy-girl relationships. It also lends an ear to young people who need someone to talk to and encourages them to exercise their rights.

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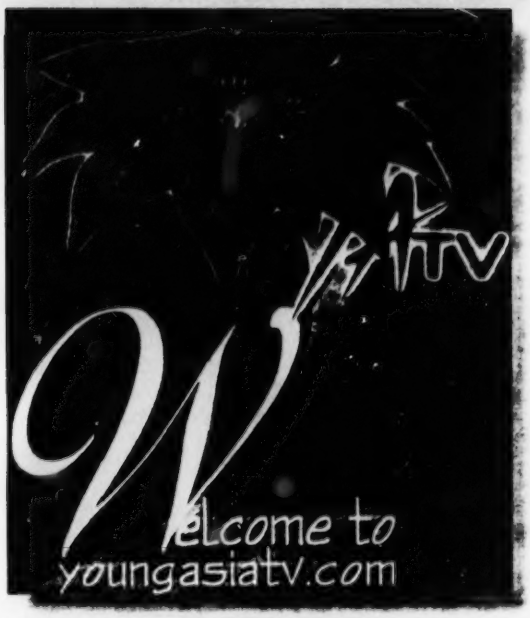

Young Asia Television

http://www.lanka.net/yatv
YA*TV, 8 Kinross Avenue
Colombo 4, Sri Lanka
E-mail: yatv@sri.lanka.net

This website gives the young people of Asia opportunities to voice their opinions. YA*TV was launched in 1995 by young people for young people, with a focus on Asian cultural, environmental and development programmes. YA*TV reaches more than 150 million viewers through television networks in ten countries. It expects to serve some 250 million Asian homes by the year 2000. Operated by the Worldview International Foundation as a self-sustaining but non-profit enterprise, YA*TV enjoys the support of the United Nations, UNESCO, UNICEF, the Asian Development Bank and other international organisations.

The website is new and the various sections are just starting to fill up. The first page describes YA*TV's history, objectives, target audiences and scope, followed by a listing of the programmes contents: *YA Cafe* is a TV magazine programme on arts, culture and lifestyles, including street fashion and stories of people and places from Java to Japan; *Nature Calls* is an environmental programme that shows the "wild, the free and the beautiful" world of nature; *I-Zone* is a user friendly source of information on compelling issues like child poverty, global warming, sexuality, reproductive health, and illiteracy; *YA Tribe – Vibes from the Tribe* deals with customs, music, dance, festivals and ceremonies around Asia; *Space to Let* looks at the world through the eyes of women and analyses their problems; *Young Outlook* contains news and current affairs for young audiences, discussing the real stories behind the headlines; and *Viet to Tell* are stories that grip the imagination and fuel the emotions. The docudrama portrays the other side of life around the world. The website also introduces the members of the staff.

Other sections cover the history of the Youth Club and its objectives, which are as follows: to provide education in human sexuality and family life, and to provide reproductive health services to young people between the ages of 10 and 24. A section on the mission statement provides the framework and platform that are the basis for all the programmes and activities. The Activities page briefly describes the operation of a chat room, logo design and website design contests, the development of a Reproductive Health of Adolescent Module, camps, talks, seminars, workshop, counselling, dialogues, training programmes and other activities. A wide range of posters, pamphlets, and charts produced by FFPAM can be viewed at the Image Gallery. Sections that are under construction include "Our Corner" and "Youth Development". Finally, the last section lists the addresses of the 13 member States of the Family Planning Association.

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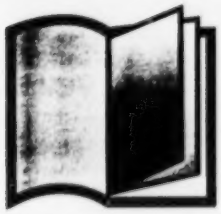

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